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EVALUATION OF UNFPA STAFF TRAINING ACTIVITIES

Report of the Executive Director

I. EXECUTIVE SUMMARY

1. This report has been prepared in response to Executive Board decision 95/35, paragraph 8, which requested the Executive Director to conduct an evaluation of UNFPA staff training activities and to report thereon to the Executive Board, through the Advisory Committee on Administrative and Budgetary Questions (ACABQ), no later than 1997. In order to fulfill the Board's request, an external evaluation of UNFPA staff training activities by independent consultants was commissioned, under the guidance of the Fund's Office of Oversight and Evaluation. The evaluation benefited from extensive in-house consultations with the various divisions of UNFPA both at headquarters and in country offices. In addition to summarizing the results of the external evaluation, this report describes the implementation of training activities since 1992 and outlines the new directions for strengthening training as provided for in a directive issued by the Executive Director in late 1996. The directive sets out new terms of reference for staff training taking into account the findings and recommendations of evaluation activities and given the need to operate within the framework of the Programme of Action of the International Conference on Population and Development (ICPD), which was adopted in Cairo, Egypt, in September 1994.

2. As a general recommendation, the evaluators felt that in future the Fund's approach to training should be expanded to encompass a more holistic concept of human resource management.

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The first step should be a comprehensive assessment of learning and training needs. Recommendations for strengthening the training included developing a training-of-trainers strategy and the creation of learning resource teams, linked as appropriate with UNFPA Country Support Teams and technical support services. The evaluators recommended developing learning resource network links, including through distance-learning modes, to provide sustained professional support for trainers and resource persons; increased coordination with other United Nations agencies, especially at local levels; and strengthened authority for line managers, with a corresponding increased decentralization of training budgets to allow for more local training and opportunities for field staff to undertake more visits and attachments to headquarters and other field offices.

3. Key recommendations relating to delivery methods and cost planning included providing additional funds for the development of supplementary learning resource centres and equipment and materials, more inter-active computer packages, distance-learning methods and establishing networks linking trainers. Finally, specific recommendations were provided for strengthening evaluation mechanisms in UNFPA training and staff development so that they placed greater emphasis on tracking how training is reflected in work performance. Related to this were recommendations calling for managers and supervisors to take greater direct responsibility for training and to create a conducive learning environment through on-the-job training, coaching, and by following up changed behaviour after return from training events.

4. UNFPA has begun a process to prepare for a more systematic analysis of training needs based on core competencies, beginning with field managers. Meanwhile several new initiatives are under way or are being explored. These include efforts to: (a) expand and upgrade refresher programme training; (b) enhance specialized induction briefings for new UNFPA Representatives; (c) strengthen specialized and refresher training for training professionals; (d) expand resources to supplement the Training Branch staff (through such methods as training of trainers and expanded outsourcing); (e) further decentralize the training budget; (f) diversify training methodologies besides face-to-face workshop methods; (g) strengthen coordinated United Nations training in line with current reform initiatives; and (h) undertake systematic evaluations.

5. The Executive Board may wish to take note of this report.

II. STAFF TRAINING POLICY

6. UNFPA's staff training policies have evolved over time. The first staff training policy for the organization was issued in 1988. Prior to that, no structured training had been organized. The policy was revised in 1995 following an internal assessment of changing needs and new organizational challenges. This has formed the basis for all training conducted since that date. In order to provide

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a context for the external evaluation, a brief summary of the Fund's training policy and activities is presented in the next two sections of this report.

7. UNFPA has placed strong emphasis on the development of its human resources to achieve the goals set out in the ICPD Programme of Action and the other international agreements that fall within its mandate. Staff training and development are seen by the Fund as a key to achieving these goals and is thus one of the cornerstones of its organizational development. UNFPA has supported a range of training activities aimed at enhancing the operational, technical and managerial capabilities of staff members at all levels, both at headquarters and in country offices. Staff training activities have sought to enable staff members to deal effectively with the demands of a changing organization, to facilitate the exchange of good practices, to build team spirit, and to increase productivity, quality and competence. Staff training activities have included on-the-job briefings; participation in in-house and United Nations system-wide workshops; participation in external courses conducted by accredited institutions; attendance at technical and professional seminars and conferences; and special assignments and attachments at headquarters and in country offices.

8. Staff training has been provided to enable field staff to respond effectively and flexibly to the capacity-building needs of Governments; to increase substantive knowledge in the Fund's three core programme areas as well as in such cross-cutting themes as gender concerns and information, communication and education (IEC); to strengthen the administrative and financial capacity of country offices to manage programmes effectively; and to accelerate the implementation of General Assembly resolutions and United Nations system-wide policies through collaborative training with other United Nations agencies and organizations. Additionally, attention has been directed at enhancing leadership skills and managerial competencies; increasing logistical, administrative, computer and information technology capabilities; and improving language skills. Staff training activities have included orientation for new staff as well as training all new staff in UNFPA policies and procedures.

III. REVIEW OF STAFF TRAINING ACTIVITIES

9. During the period from 1992 to 1996, the biennial staff training budget was increased from $1.3 million for the years 1992-1993 to $1.5 million for 1994-1995 and to $2.55 million for 1996-1997. With these increases in allocations, it was possible for the Fund to expand the number of training activities and workshops and to introduce new activities. Table 1 shows UNFPA's actual annual expenditures on staff training from 1992 to 1996. Expenditures for field staff rose as a proportion of overall expenditures during this time period. The unusually high expenditures in 1995 were the result of the opportunity provided by the post-ICPD UNFPA Global Meeting of all staff that was held in Rye, New York, in that year. This unique gathering allowed the Fund to provide several training activities both before and after the meeting to a large number of staff members.

10. Generally, the costs of staff training have increased over time, although UNFPA has been able to minimize these increases by pursuing savings at every opportunity. Training activities are approved in accordance with policy guidelines that specify that each training request should be carefully screened to match training content with job requirements. The aim has always been to find the most cost-effective venue, to minimize training time away from work and to offer the most appropriate mode of training. Innovative use of locally available or visiting resource persons, cost-sharing arrangements with inter-agency partners, minimal travel expenditures and use of materials already available have all been pursued as ways of keeping costs down. Staff training curricula have been drawn from existing sources, including manuals and modules from both public and private sector training courses, in order to realize savings in development and design costs. The development of training tools has been confined to those that are interdisciplinary and were previously unavailable, and, whenever possible, such development costs have been shared with other partners.

TABLE 1 - UNFPA STAFF TRAINING ANNUAL EXPENDITURES, 1992 - 1996

Year	Field Expenditures	HQ Expenditures	Total Expenditures
1992	$193,312 (58%)	$138,922 (42%)	$332,234
1993	472,236 (73%)	171,801 (27%)	644,037
1994	564,296 (83%)	110,126 (17%)	674,442
1995	806,800 (90%)	88,075 (10%)	894,875
1996	501,856 (68%)	241,003 (32%)	742,859

11. Table 2 shows UNFPA staff training activities by programme category, and by numbers trained or briefed, for the same period, 1992 to 1996. The table also includes the numbers of workshops and briefings and the person training days achieved (i.e., the number of staff who attended multiplied by the number of training days) as an indicator of the extent of training activity. The numbers of field staff in attendance at training events and workshops grew considerably from 1994 on because special attention was paid to their particular needs given the expanding responsibilities of country offices as a result of the increased decentralized approval authority in 1993 and the ICPD in 1994. A detailed description of UNFPA staff training activities is presented in annex 1.

TABLE 2: UNFPA STAFF TRAINING ACTIVITIES BY PROGRAMME CATEGORY, NUMBERS TRAINED OR BRIEFED BY YEAR, 1992-1996*

ORIENTATION/BRIEFINGS	1992	1993	1994	1995	1996
Policies and procedures orientation for newly recruited national programme staff	0	1 Workshop 26 Staff 260 PTD**	1 Workshop 22 Staff 286 PTD	0	1 Workshop 23 Staff 299 PTD
Induction briefing for Junior Professional Officers	4 Briefings 8 Staff 16 PTD	3 Briefings 13 Staff 39 PTD	1 Workshop 10 Staff 40 PTD	1 Workshop 14 Staff 84 PTD	1 Workshop 11 Staff 66 PTD
Policies and procedures for newly recruited HQ General Service staff	0	1 Workshop 10 Staff 40 PTD	1 Workshop 10 Staff 50 PTD	0	1 Workshop 12 Staff 48 PTD
Induction briefing for newly recruited UNFPA Representatives/ UNDP Representatives	5 Briefings 8 Staff 62 PTD	3 Briefings 8 Staff 40 PTD	7 Briefings 21 Staff 98 PTD	2 Briefing 29 Staff 66 PTD	6 Briefings 10 Staff 55 PTD
TRAINING WORKSHOPS					
Programme training workshop for senior programme staff in the field	0	0	0	1 Workshop 19 Staff 152 PTD	1 Workshop 19 Staff 95 PTD
Management development workshop for UNFPA Representative and senior headquarters officers	0	2 Workshops 40 Staff 200 PTD	2 Workshops 34 Staff 170 PTD	1 Workshop 13 Staff 65 PTD	2 Workshops 32 Staff 160 PTD
Management coordination for senior field representatives	4 Workshops 9 Staff 81 PTD	5 Workshops 9 Staff 81 PTD	3 Workshops 7 Staff 63 PTD	3 Workshops 11 Staff 99 PTD	2 Workshops 2 Staff 18 PTD
Finance information management workshop for UNFPA Representatives and senior programme staff	0	0	0	3 Workshops 91 Staff 253 PTD	0

TABLE 2 (CONT'D) : UNFPA STAFF TRAINING ACTIVITIES BY PROGRAMME CATEGORY, NUMBERS TRAINED OR BRIEFED AND BY YEAR, 1992-1996 *

TRAINING WORKSHOPS (Cont'd)	1992	1993	1994	1995	1996
Finance information management workshop for field finance and administration staff	2 Workshops 38 Staff 264 PTD	2 Workshops 48 Staff 240 PTD	2 Workshops 42 Staff 294 PTD	0	1 Workshop 18 Staff 108 PTD
Advocacy/media/gender/training workshops for UNFPA Representatives, senior programme staff and senior headquarters staff	0	0	2 Workshops 12 Staff 24 PTD	12 Workshops 191 Staff 307 PTD	1 Workshop 10 Staff 30 PTD
Refresher training for headquarters General Service staff (writing skills, financial/accounting policies and procedures, procurement and stress management)	0	2 Workshops 88 Staff 218 PTD	1 Workshop 25 Staff 75 PTD	0	7 Workshops 127 Staff 127 PTD
INDIVIDUAL/OTHER TRAINING					
Country Office/interagency/educational assistance programme/external training programme	62 Staff 154 PTD	67 Staff 155 PTD	72 Staff 186 PTD	161 Staff 367 PTD	185 Staff 457 PTD
TOTAL number of workshops/briefings	15	19	20	23	23
TOTAL number of staff briefed/trained	125	309	255	529	449
TOTAL number of staff training days	577	1,273	1,286	1,393	1,463

* Figures do not include Management Information Service (MIS) training provided under a separate budget.
** PTD=person training days

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IV. EVALUATION

12. The external evaluation that was requested by the ACABQ was designed to assess the cost-effectiveness of UNFPA's staff training programmes during the period 1992-1996 and to provide recommendations for strengthening future staff training efforts. The principal training activities evaluated were major group training workshops -- orientation workshops, financial management, general managerial, programming and communication skills training. The training courses that were subject to evaluation constituted 70 per cent of training expenditures in the period under review. Since the bulk of UNFPA's training resources each year had been used in training field staff, the evaluators visited six country offices, two each in Africa and in Asia and the Pacific, and one each in Arab States and in Latin America and the Caribbean. In addition, interviews and an electronic-mail survey were used to collect information from a sample of trainees and their supervisors in other country offices and at headquarters. The evaluators undertook a cost-benefit analysis of the major selected training programmes. Direct and indirect costs and measurable and non-quantifiable benefits were examined against the length of the programme, the professional level of the staff being trained, the numbers trained and the amount of resources used, in order to produce comparative rating assessments between the major training programmes.

13. Overall, the evaluators noted that staff training funds were used effectively and efficiently, particularly by sharing costs with other events, whenever possible. It was found that the Training Branch had continually improved the quality of what was offered on the basis of regular reviews. To match the expansion in the training budget, the evaluators found a corresponding volume of workshops and participants over the period while staffing of the Training Branch had remained compact, with two professional and two general service staff, given the volume of work undertaken and in comparison with similar organizations. The small staff had accomplished significant gains in training coverage and range. The overall judgement was that the training provision within UNFPA had made a significant and notable contribution to the organization's vital knowledge and skill acquisition over the period.

14. With reference specifically to performance impact, defined as stated or observable change in work practice, the evaluators noted many constraints. A considerable passage of time had occurred between the training events reviewed and the impact assessment, thereby distorting the perspectives needed to match training received against actual or perceived performance changes. Some staff were unavailable to participate in the interviews or surveys, being on mission or having moved to another duty station. This was a special constraint with field staff. The number of countries visited and staff interviewed was kept small to keep travel costs reasonable. However, this resulted in a small sample population from which the evaluators were asked to derive evidence of effectiveness. The evaluators, nevertheless, attempted as thorough an investigation as possible and drew conclusions, noting, on occasion, that these were sometimes impressionistic.

15. The evaluators' rankings of the workshop programmes gave the highest ratings for cost-effective impact to finance training, followed by orientation and refresher training and other skills-based training such as advocacy, writing, and media training. The evaluators noted that, generally, technical training was more evident in its impact relative to non-technical areas of training. The lowest relative rating was accorded to generic management development training. One reason was that the cost of this programme, as for the advocacy training, was higher because of the use of external resource persons. Special attention was paid to management development training by the evaluators. In spite of their qualifications, evaluators still felt that this training programme should be continued in the future as a crucial part of training and staff development. They noted that in the past these workshops tended to be too narrow in focus, were too short, did not distinguish the needs of headquarters managers from those of field office managers, and that the target audience was also too narrow. It was felt that, in the future, consideration should be given to including middle managers in addition to senior managers and to vertical-type training, i.e., to include all team members in team group training together, regardless of level. They also noted that such training programmes in future needed to be evaluated more systematically on return to the job environment to ensure that the new skills were being used effectively.

16. Additionally, through interviews and questionnaires the evaluators looked to see how learning was being integrated into the organization, how it was being shared, and what alternative methodologies there might be for training delivery. Concerning integration of new learning, the evaluators noted that supervisors generally did not do much to help trainees to build new learning into their work. Responsibilities for making the most of training on the job was seen to lie with the returning trainee. Thus, managers and supervisors were not sufficiently involved in helping trainees with an appropriate environment to practice new and innovative approaches. The supervisors themselves, however, perceived that they provided ample opportunities for trainees to apply their new knowledge.

17. Concerning the diffusion of new learning, the evaluators concluded that a good deal of sharing did take place. Much of this appeared to be informal rather than being deliberately planned, for example, by the supervisor. Of the overall responses, slightly over 70 per cent said they did pass on new learning to others in their offices.

18. The evaluators found that in responding to questions about possible alternatives to workshops or the face-to-face methodology of training delivery staff were overwhelmingly in favour of continuing the face-to-face approach. Staff felt group training events offered particular benefits in terms of sharing, in particular for face-to-face sharing of problems and experiences between field and headquarters staff. However, the staff did express an openness to try new initiatives and alternative methods, in particular through self-learning interchange with other staff in on-the-job training;

attachments to other field offices and/or headquarters; study tours; videos and CD-ROMS; and other automated, open or distance-learning methods.

19. The overall problems noted by the evaluators were that they found that the approach to training tended to be too narrow and lacked systematic follow-up evaluation. While assessments had been carried out during or immediately following training events on what the participants had learned and on their reactions to the training, no system to track impact over time had been put in place. Needs analysis was not systematically documented and staff sometimes perceived training attendance as being mandatory, the result of top-down decisions. On the other end, the evaluators noted that, in general, the training workshops had provided for significant advances in the acquisition of vital knowledge and skills. In addition to indications of overall improvement in work practices, there was evidence of such unquantifiable and invaluable benefits as improvements in performance motivation and confidence-building. In order to address the difficulties and challenges for the future, the evaluators underscored specific problems relating to training approach and structure; needs analysis and links to human resource development; training strategy; training delivery and cost planning; and evaluation for impact assessment. Specific possible solutions were offered in all these areas and are reflected in the proposals for further strengthening the Fund's learning environment in section V below.

20. As a general recommendation, the evaluators felt that in future the approach to training should be expanded to encompass a more holistic concept of human resource management. The first step should be a comprehensive assessment of learning and training needs. Recommendations for strengthening the training included developing a training-of-trainers strategy and the creation of learning resource teams, linked as appropriate with the Country Support Teams and the technical support services. The evaluators recommended developing learning resource network links, including through distance-learning modes, to provide sustained professional support for trainers and resource persons; increased coordination with other United Nations agencies, especially at local levels; and strengthened authority for line managers, with a corresponding increased decentralization of training budgets to allow for more local training and opportunities for field staff to undertake more visits and attachments to headquarters and other field offices.

21. Key recommendations relating to delivery methods and cost planning included providing additional funds for the development of supplementary learning resource centres and equipment and materials, more inter-active computer packages, distance-learning methods and establishing networks linking trainers. Finally, specific recommendations were provided for strengthening evaluation mechanisms in UNFPA training and staff development so that they placed greater emphasis on tracking how training is reflected in work performance. Related to this were recommendations calling for managers and supervisors to take greater direct responsibility for training and to create a conducive learning environment through on-the-job training, coaching, and by following up changed behaviour after return from training events.

V. PROPOSALS FOR FURTHER STRENGTHENING STAFF TRAINING

22. Based on the evaluation findings and the recommendations of an internal management review, UNFPA took important strides in late 1996 to strengthen the learning and training function within the organization. The Executive Director issued a directive on UNFPA staff training that outlined new terms of reference for staff training and development and set out new initiatives for implementation that continue to give priority to staff training as a crucial part of human resource management and organizational development.

23. The Training Branch has been transferred to the Division of Finance, Personnel and Administration, with two professionals and two support staff. This now enables closer links between the personnel and training functions. An Advisory Committee on Training under the Deputy Executive Director (Policy and Administration) has been revitalized to provide for a broad-based policy approach to learning with inter-divisional representation at the Director level.

24. UNFPA has begun a process to prepare for a more systematic analysis of training needs based on core competencies, beginning with field managers. Meanwhile several new initiatives are under way or are being explored. These include efforts to: (a) expand and upgrade refresher programme training; (b) carry out specialized induction briefings for new UNFPA Representatives; (c) strengthen specialized and refresher training for training professionals; (d) expand resources to supplement the Training Branch staff (through such methods as training of trainers and expanded outsourcing); (e) further decentralize the training budget; (f) diversify training methodologies besides face-to-face workshop methods; (g) strengthen coordinated United Nations training in line with current reform initiatives; and (h) undertake systematic evaluations.

25. Internal reviews of the content of all training curricula to match the upgrading of specific skills and competencies have been initiated, beginning with project- and programme-related field workshops. Analytical and assessment methods and tools are being introduced into course contents, including logical framework and stakeholder analyses. Management training is also being reviewed to take account of the recommendations of the evaluation and to ensure that it responds to UNFPA's needs. Specially tailored training is already being pilot tested for new UNFPA Representatives. Induction briefings have become more structured and for longer duration and will include attachments at headquarters and to selected country offices in order to observe best practices. The training staff will continuously undertake refresher training themselves in order to upgrade training techniques and methods and their own professional knowledge and skills.

26. To further enhance training capacity, a training-of-trainers strategy is being planned to extend the learning environment; this will include using both in-house and external assistance in specific skills

and competency development. A series of interventions are being explored to support the key training of focal persons who will then be provided with continuous support through electronic means, information, materials, packages and distance-learning networks. Core teams of trainers, UNFPA officers from various divisions at headquarters, the country offices and the Country Support Teams and technical support services will be equipped with training skills so that they can be called upon as trainers for specific training activities. Given the limited staffing at central level, and in order to diversify resources, greater use of outside experts and institutions will be used to supplement in-house trainers. In 1996, an initial phase of decentralization of the training budget was launched. This further facilitated managers in country offices in using local training expertise and opportunities flexibly and in collaborating with other United Nations system partners at the local level. In late 1997, a review of this experience will be made with the view to further increase the decentralization of training budgets to the field, if appropriate.

27. The proposal for the delivery of training during the next biennium, 1998-1999, that is being submitted to the ACABQ for its consideration reflects UNFPA's commitment to continue to deliver quality training through the most cost-effective mechanisms and with expanded, faster-paced response to training needs as they are identified. Workshop training will continue to be needed in introducing new policy and programme guidelines, in increasing substantive knowledge and in updating staff on changing financial procedures in line with the increasing decentralization of the organization. At the same time, however, increased use of alternative and more cost-effective delivery training avenues are being explored to widen the support given to resource teams of trainers in the field by providing them with resources and equipment for new training methodologies, including open and distance learning and interactive electronic and computer systems, as feasible. The computer and electronic infrastructure that has been established within UNFPA now allows for faster information flows on training offerings as close to duty stations as possible, including various South-South training offerings. As part of this effort, a register of training opportunities will be explored to list available training aids, training packages, and materials.

28. UNFPA has been an active supporter of greater coordination in training throughout the United Nations system. Close collaboration and benefits have been realized in the coordination efforts of the Joint Consultative Group on Policy (JCGP), the Consultative Committee on Policy and Operational Questions of the Administrative Committee on Coordination (CCPOQ/ACC) and with the United Nations Staff College (UNSC) in Turin. UNFPA will continue to support management coordination training for senior field representatives as part of the efforts to build a coordinated United Nations learning organization. UNFPA will strengthen its support for coordinated training as part of United Nations reform initiatives and continue to second a full-time adviser for strengthening the United Nations Resident Coordinator System and post conference follow-up. UNFPA will continue to develop its links with the Chiefs of Learning Forum, which provides electronic access among the chiefs of training of contributing United Nations organizations to facilitate faster communications and networking for coordinated system-wide training. Further efforts

in the future will be made to use similar mechanisms to strengthen connections at regional and country levels between other United Nations organizations and development partners.

29. Training activities will continue to be evaluated to assess the impact of these activities not only for trainee knowledge and reaction during and immediately after training interventions but also for impact assessment linked to needs-based criteria. Greater emphasis will be placed on assessing the impact of training activities through increased involvement of managers and supervisors. Managers and supervisors will be responsible for fostering a learning environment through on-the-job training, coaching and mentoring as part of ensuring the continuum from learning to improved day-to-day job performance, as well as ongoing monitoring of the impact of the training. Through the year-end performance appraisal exercise managers and supervisors will be called upon to assess the results of the training received by their staff and comment on the impact of overall job performance.

VI. RECOMMENDATION

30. The Executive Board may wish to take note of the Report on UNFPA Staff Training Activities.

ANNEX 1

Description of UNFPA Training Programmes

1. Orientation and training workshops. UNFPA's orientation and training workshops are designed to impart an overall understanding of the context of UNFPA's work within the United Nations system and of the substantive areas in which it works; to enhance skills in the design and implementation of projects and programmes; and to increase awareness of financial, audit and administrative rules and regulations. Since 1992, the content of the training has been expanded in depth and the duration has been lengthened to increase training on the Fund's computerized financial procedures. Since 1994, UNFPA has conducted training for newly recruited Junior Professional Officers. This training has become increasingly structured and of longer duration. Until 1994, such training had been carried out by UNDP with only 1-2 days of briefings being provided by UNFPA. The aim of this training has been to shorten the time needed for learning on the job and to increase the effectiveness and productivity of staff more rapidly. Since 1993, all new General Service staff have attended structured group workshops on the procedures relating to office administration, including techniques for improved filing, communications and information management, personnel and hiring procedures. Additionally, all new UNFPA Representatives, as well as UNDP Resident Representatives who requested briefings, were provided with intensive and brief sessions on the policies and procedures of UNFPA prior to assuming assignments. These briefings ranged from 1-2 days in the case of UNDP Resident Representatives to 2-3 weeks in the case of UNFPA Representatives, including briefings in another country office, depending on their individual needs.

2. Refresher training. Refresher training for senior field programme staff was introduced in 1995. The content has been structured to help field staff develop their programme design and appraisal skills and to share key operational strategies for the implementation of the ICPD Programme of Action. These workshops also aim to increase substantive knowledge in reproductive health, population and development strategies, and advocacy, and to help these staff members understand better how to mainstream gender and IEC within the Fund's country programmes.

3. Management development. Management development training workshops were introduced in 1993 to enhance competencies in team-building, decision-making, communication, and the management of organizational change. These workshops are designed to follow up on earlier introductory programmes that deal with work planning, staff organization and personnel appraisal. A total of 95 per cent of field and headquarters senior staff attended these management development workshops, which have been conducted by external consultants.

4. UNFPA has also supported the inter-agency United Nations Staff College-sponsored workshops on Management Coordination for Senior United Nations Field Representatives held in Turin, Italy. The aim of these workshops is to increase awareness and application of common United Nations programme frameworks and to strengthen competencies for coordinated assistance to

national capacity-building at the country level. These workshops bring together the entire United Nations country team in a selected country for an intensive session designed to foster and strengthen cooperation in the country concerned. Since 1992, UNFPA Representatives of those country teams selected have participated in every workshop either as participants or as resource persons. A few headquarters technical staff and the Chief of Training have also served as resource advisers for this training effort. Since 1995, UNFPA has seconded a staff adviser to the United Nations Staff College at Turin to assist in developing curricula that reflect the ICPD Programme of Action.

5. Financial management. With the increased organizational emphasis on accountability and sound management that has accompanied greater decentralization, additional workshops on finance management have been conducted for national finance and administration staff as well as for UNFPA Representatives. The content of these workshops has covered financial rules and regulations, audit procedures, guidelines for control, operation and reporting of expenditures and the use of increasingly computerized systems for financial planning, implementation, monitoring and reporting for both programme and APSS budgets.

6. Advocacy and media training. Following the ICPD there have been a greater number of requests for training in advocacy skills. Advocacy training for UNFPA Representatives has been provided to prepare country-specific strategies and tools in support of operationalizing the programmes of requesting Governments. Selected headquarters senior staff also received media skills training in 1994. The greater importance of gender issues in the post-ICPD context resulted in the introduction of gender awareness training in 1995. Senior field programme officers and UNFPA Representatives and selected headquarters programme staff were included in brief and intensive sessions on gender issues in 1995.

7. Training for General Service staff. In 1996 selected General Service staff at headquarters were invited for refresher training in areas of expressed need for more effective administrative, financial, logistic, personnel-related and secretarial duties. The areas covered included organizational policies and office administration and procedures and writing skills. Techniques for handling stress positively and improving interpersonal communications skills were also included. Additionally, information management and computer-related training at the introductory, intermediate and advanced levels were provided for separately under the management information services (MIS) budget. (Description of these activities are not included in Table 2.)

8. Local training. In addition to the key group training workshops organized by UNFPA or co-sponsored with United Nations or other partners listed in Table 2, UNFPA also has supported staff at country offices in specific individualized training activities. In country offices, managers have increasingly found local training solutions to meet the needs of staff to improve their language

capabilities and to enhance staff competencies in office management and information handling. At the country level, coordinated training has been carried out with other United Nations agencies and organizations on a cost-sharing basis. These training activities have addressed such subjects as enhancing national execution, joint programming, the programme approach, Country Strategy Note planning, HIV/AIDS, Safe Motherhood and other substantive areas. Since 1995, budgetary approval for such individualized training has been decentralized.

9. External training and educational assistance. UNFPA has, in some cases, supported staff participants in external training courses or events to enhance substantive knowledge in specialized topics at advanced levels. Such training was also utilized if it was not economical to address training needs in a group setting because of the limited number of participants. UNFPA has also supported individual self-directed training for staff enrichment and career development at training, academic or accredited institutions of learning through the educational assistance programme on a 50-50 cost shared basis with the staff member. Such training was usually carried out outside of official work hours.

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MEETING THE GOALS OF THE ICPD: CONSEQUENCES OF RESOURCE SHORTFALLS UP TO THE YEAR 2000

Report of the Executive Director

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EXECUTIVE SUMMARY

1. UNFPA presented a conference room paper (DP/FPA/1997/ CRP.1) to the Executive Board at its annual session in May 1997. The Board discussed the paper with interest and requested that the analysis be refined and the data and methodology described in detail. The Board further requested that the revised report be submitted to the Board at its third regular session 1997 (decision 97/20). The present report responds to that request. The report is accompanied by an annex which explains the data, methodology and assumptions used in the report and contains tables on the consequences of resource shortfalls, the rates used for the estimates of these consequences, and possible patterns for donor assistance for the year 2000. It also provides a composite list of references used in the text, tables, figures and notes to the report.

2. The International Conference on Population and Development (ICPD) outlined a comprehensive agenda of activities for population and development including public, private and civic actions for reproductive health, mortality reduction, women's empowerment, poverty eradication and educational advancement. A new paradigm of population and development emerged from the Conference -- one that shifted population away from an exclusive focus on demographic concerns and targets to one that put the well-being of individual women and men at the centre of sustainable development. The ICPD's Programme of Action acknowledged the salience of demographic goals for macro-level development but underscored that such goals can best be accomplished by meeting the needs of individuals and increasing the role of all groups in civil society in achieving sustainable development.

3. The ICPD's Programme of Action constituted a 20-year plan, anchored in an overall human rights framework, for attaining a wide variety of goals: universal access to quality reproductive health services, including voluntary family planning, so that by the end of the 1995-2015 period all couples who so desired would have access to affordable and effective services; reductions in infant, child and maternal mortality; gender equity and equality and the empowerment of women; the widest possible access to secondary and higher levels of education for girls and women; and universal primary education. A basic package of integrated population and reproductive health programmes was accepted as central to this development plan.

4. The Programme of Action specified the financial resources (both domestic and donor funds) needed to implement the population and reproductive health package over the 20-year time span: $17 billion per annum in 2000 (and up to $21.7 billion in 2015). In 1994 and 1995, substantial resource increases were recorded, and in 1995 around $9.5 billion was mobilized. Some concern has been expressed, based on incomplete data, that this momentum has not been maintained after 1995.

5. This report examines the likely consequences of not meeting the goals of the ICPD Programme of Action due to resource shortfalls. It projects some readily quantifiable results of

such shortfalls, based on three plausible scenarios of future resource mobilization through 2000. These likely consequences include:

- An additional 44 million to 80 million individuals or couples not using any contraceptive method at all in the year 2000;
- An additional 130 million to 230 million unintended or unwanted pregnancies in the 1995-2000 period;
- An additional 50 million to 90 million induced abortions in the 1995-2000 period;
- An extra 59 million to 110 million unintended births between 1995 and 2000;
- An additional 300,000 to 540,000 maternal deaths during 1995-2000;
- An additional 4.9 million to 8.9 million infant and child deaths during 1995-2000.

I. INTRODUCTION

6. This report has as its main objective the illustration of specific population and reproductive health consequences that are likely to occur if the international community fails to implement the Programme of Action set out at the International Conference on Population and Development (ICPD) held in Cairo, Egypt, in September 1994. The ICPD Programme of Action was designed, *inter alia,* to help developing countries and countries with economies in transition to meet future demand for reproductive health and family planning information and services, including the prevention of sexually transmitted diseases (STDs). The Programme of Action set out a schedule of financial targets for resource mobilization, on the part of both developed and developing countries, that would be required to meet this growing demand. These two parts of the Programme of Action are linked: a shortfall in resource mobilization will cause developing countries to miss achieving the Programme of Action's goals for reproductive choices and the reproductive outcomes. Quantifying the consequences of resource shortfalls on a selected set of indicators on reproductive outcomes, then, is the purpose of this report.

7. The Programme of Action, in paragraphs 13.15 and 14.11, laid out the international consensus on future global resource mobilization for the 1995-2015 period as follows (in billions of dollars per year):

	2000	2005	2010	2015
Domestic resources	$11.3	$12.4	$13.7	$14.5
Donor countries' assistance	$5.7	$6.1	$6.8	$7.2
Total resource requirement	$17.0	$18.5	$20.5	$21.7

The shares between donor and developing countries, one third and two thirds, respectively, was agreed in the Programme of Action (para. 13.16). At the same time, it was recognized that a great variation existed among countries in their ability to allocate domestic resources for implementing the Programme of Action. It was clearly foreseen, for instance, that in the least developed countries and other low-income countries, including many sub-Saharan African countries, a relatively larger part of the total needed resources would have to come from external sources on a concessional or grant basis.

8. The fact that a strong consensus emerged in Cairo, for both a focused programme on population and reproductive health and an agreed schedule of resource mobilization, produced a sense of optimism that global population and reproductive-health issues would be dealt with in a concerted way following a pragmatic 20-year plan. Indeed, a report on resource flows to the recent session of the Commission on Population and Development documented substantial and encouraging increases in official development assistance (ODA) and other international resources for population in both 1994 and 1995, reaching the $2.0 billion level in the latter year (document E/CN.9/1997/6). The report also analysed partial information on domestic financial flows in developing countries themselves. Preliminary, rough estimates of domestic flows for 1995 indicate that government allocations for population may have been in the order of $6.4 billion, with another $1.1 billion from domestic private sources. This results in a total resource level for both domestic and international sources of $9.5 billion in 1995.[1] If data collection efforts now under way confirm these figures, it would mean that recipient countries contributed around 78 per cent to total population resources in 1995 ($7.5 billion of the total $9.5 billion), a proportion greater than the 67 per cent agreed to in Cairo for the year 2000.

9. The Commission report, however, also noted indications of a slackening in external resource flows in 1996. This is reaffirmed by preliminary assessments for the resource situation for 1997, particularly as regards the donor community as a whole. At a meeting of donor countries convened by UNFPA in March 1997, several countries voiced their concern at this slow down in resource flows and the negative consequences that insufficient resource mobilization would have for population and development efforts -- one of the most successful and cost-effective areas of developmental assistance over the last 25 years. Many countries represented at that meeting asked UNFPA to prepare a quantitative analysis of the consequences

for the implementation of the ICPD of failure on the part of the donor community to meet its share of the ICPD's resource mobilization targets for the year 2000.

10. In response to this request, UNFPA presented a conference room paper (DP/FPA/1997/CRP.1) to the Executive Board at its annual session in May 1997. The Board's discussion showed that the paper's theme was viewed as an extremely important one. The Board requested that the analysis be refined, that the methodology used be made more explicit and that the data used be described in detail. The present report responds to that request of the Executive Board.

II. METHODOLOGY AND SCENARIOS

11. The methodology used to estimate the negative consequences of resource shortfalls to the year 2000 is based on the methodology used in preparations for the ICPD itself to estimate resource requirements (UNFPA, 1994b). Of the total requirement of $17 billion for the year 2000, four components were identified in the Programme of Action: (a) the family planning component, $10.2 billion; (b) basic reproductive health services, $5 billion; (c) specific programmes for the prevention of STDs, including HIV/AIDS, $1.3 billion; and (d) basic research, data and policy analysis, $500 million.[2] The first and largest component, on family planning, was estimated using a methodology grounded in a reproductive rights approach and based on the unmet needs for family planning services expressed by individuals and couples themselves. Using a regional level of analysis, unmet need for family planning by region was estimated. This was coupled with projected annual costs per contraceptive user by region to arrive at global estimates of annual resource requirements. A methodology developed at the World Bank was used to further project the future evolution of contraceptive prevalence and unmet need.

12. Data from demographic and health surveys, a key input into the costing methodology, show that unmet need for contraceptives, based on married women not practicing family planning, ranges from 14 per cent of married couples in countries such as Brazil, Colombia, Indonesia and Sri Lanka to more than 35 per cent in other countries such as Bolivia, Ghana, Kenya and Togo. These figures, as well as those based on the earlier World Fertility Survey, are usually considered to be underestimates because they do not include sexually active unmarried adults and adolescents. In many countries, the unmarried, adolescents and men in general do not have adequate access to family planning services. Statistics on abortion provide yet another strong indication of unmet need for family planning: women often resort to abortion because of a lack of available contraceptive services, a dissatisfaction with existing services, failure or ineffective use of a contraceptive, or insufficient support for their own reproductive desires.

13. Service cost per user is the other principal variable needed for estimating resources required for the family planning component of the Programme of Action. Studies of family planning expenditures per contraceptive user have, however, been conducted for various

countries and show that costs vary considerably from country to country. For example, in Ecuador, with 435,000 modern contraceptive users served, the average annual family planning expenditure per user for the period 1990-1994 was estimated at $14. In Bangladesh, with more than 5 million modern contraceptive users served, the annual expenditure per user came to around $13 in 1986-1990. Data for the Philippines show that in 1994, with an estimated 2.3 million modern contraceptive users served, the average annual cost per user was over $21. The annual family planning expenditure per user in Ghana, which had almost 260,000 modern contraceptive users, came to $27 in 1993. On the other hand, Cote d'Ivoire spent more than $50 per modern contraceptive user in 1994; the country reported just over 83,000 modern contraceptive users.[3]

14. Using this basic approach, the present report explores various consequences of shortfalls from estimates of total required resources. The methodology used to obtain quantitative estimates of consequences of resource shortfalls is explained in detail in the Annex to this report. The data sources used in the calculations are also fully referenced there. Assumptions that lie behind the computations are likewise discussed in the Annex. This methodology is based on, and closely mirrors, a methodology developed by the Alan Guttmacher Institute to examine reductions in international assistance for population by the United States of America.[4] As indicated in the Annex, the numerical estimates that this methodology produces are approximations: they should be interpreted as indicating the order of magnitude for each specific consequence of resource shortfalls.

15. Three scenarios depicting possible future courses of resource mobilization for the period 1995-2000 are illustrated in this report. As mentioned, in 1995 domestic financial flows for population amounted to around $7.5 billion (including estimated private flows) and ODA flows to about $2.0 billion, for a total of $9.5 billion from both domestic and international sources. Between 1990 and 1995, international assistance increased by approximately $1 billion, from $1.1 billion to $2.0 billion. The first scenario, called the **Constant Trend Growth Scenario**, assumes the observed rate of growth into the future up to the year 2000, at which time international assistance would have increased to $3.6 billion, some $2.1 billion below the ICPD target. This scenario additionally assumes that the domestic flows of recipient countries continue to grow and reach the ICPD target of $11.3 billion.

16. Given recent indications of a slackening in external resource flows, a second scenario, termed the **Intermediate Growth Scenario**, is also constructed. In this scenario, future external assistance is assumed to grow 20 per cent slower than in the first scenario, reaching only $2.8 billion in the year 2000. This scenario also assumes an on-target trend in the domestic flows of recipient countries, reaching $11.3 billion in 2000. Finally, a third scenario, the **Low Growth Scenario**, is included to explore the implications of slower growth of domestic financial flows for population, coupled with the slow growth in donor assistance depicted in the first scenario. An annual growth rate of only 5 per cent in domestic allocations (instead of 8.5 per cent, as in the

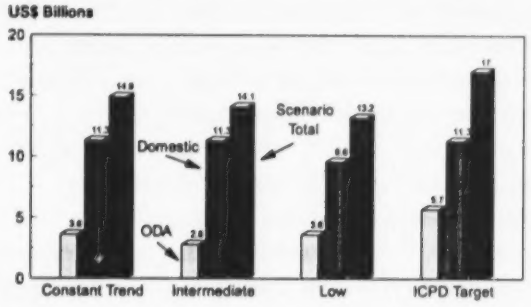
first two scenarios) is assumed for this scenario. The following table summarizes the three scenarios (see, also, Figure I):

Resource Mobilization in 2000 (billions of dollars)

Scenario	Donor Flows	Domestic Flows	Total Resources	Shortfall
1. Constant Trend Growth	$3.6	$11.3	$14.9	($2.1)
2. Intermediate Growth	$2.8	$11.3	$14.1	($2.9)
3. Low Growth	$3.6	$ 9.6	$13.2	($3.8)

17. The three scenarios presented in this report are based on three different sets of assumptions about possible levels of resource mobilization for implementing the ICPD agenda. The report makes no conclusions about which of the possible scenarios is more likely to take place. However, it does show that the consequences associated with under-achievement of the ICPD goals will vary greatly depending on the extent to which global resource mobilization falls short of agreed targets.

Figure I. Levels of Resource Mobilization: Three Scenarios for Year 2000



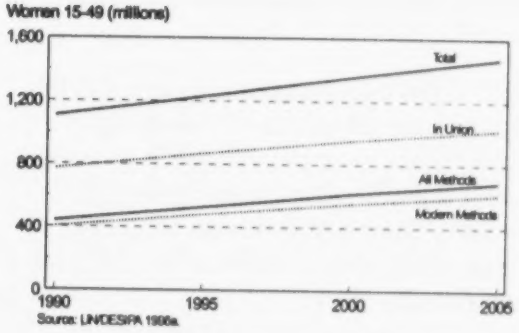
III. CONSEQUENCES OF RESOURCE SHORTFALLS

18. This section presents the main analytical findings concerning the implications of shortfalls in resource mobilization below the targets agreed to at the ICPD. Lower levels of resources would necessarily mean that the ICPD agenda would not be fully implemented, thus slowing progress towards achieving ICPD goals and worsening various reproductive outcomes. This report focuses on a number of implications of a less-than-full implementation of the ICPD, including reductions in potential users of family planning services and increases in traditional contraceptive use as well as in non-use of contraception; increases in the number of unintended pregnancies; additions to the number of induced abortions; increases in the number of unintended childbirths; additional maternal morbidity and mortality; and increased infant and child mortality. (See tables 1 and 2 in the Annex for, respectively, a composite of these consequences and a summary of the rates used to estimate these consequences.) All these consequences flow from expected changes in the number of individuals and/or couples using

various methods of contraception. Another consequence, the lower quality of reproductive health services, would have additional consequences. These effects are more difficult to quantify, however. The Fund is beginning to undertake in-depth analyses of them, recognizing that high-quality comprehensive reproductive health services are a necessary and important component of any basic health-care package.

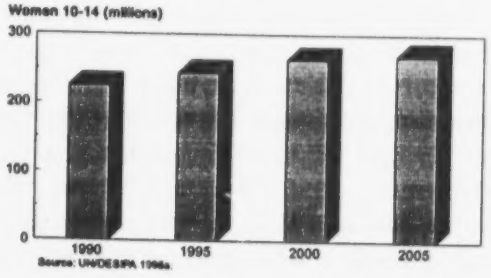
19. Figure IIa shows the basic data on the number of women aged 15-49 in developing countries and countries with economies in transition from 1990 to 2005. By the year 2000, there will be 1.35 billion women in the reproductive ages, 950 million of whom will be married or in a stable consensual union. Over the 15-year period depicted in Figure IIa, the number of married women in reproductive ages in developing countries and countries in transition will increase by about one third. The lines in the lower part of Figure IIa show the expected growth in the number of individuals or couples who will be practising family planning. In 1995 there were an estimated 470 million contraceptive users in developing countries and 60 million in countries in transition. The upward trends in total contraceptors and contraceptors using modern methods is predicated on the successful implementation of the ICPD's 20-year plan to make quality reproductive health and family planning services accessible to all couples and individuals by the year 2015. Thus, it is forecast that, in 2000, between 610 million and 640 million couples in developing countries and countries in transition will be using contraceptives if the resources agreed to by the ICPD are in fact mobilized from domestic and international sources and made available for the implementation of the Programme of Action.

Figure IIa. Estimated and Projected Number of Women Aged 15-49



20. Figure IIb shows how the numbers of adolescent women aged 10-14 will likewise increase over the period 1990-2005. The extent to which the Programme of Action is fully implemented to include the needs of this growing cohort of young women will determine in large part how successful the ICPD will ultimately prove to be. Equal access to education, elimination of gender bias, as well as appropriate counseling and communication on sexual concerns and reproductive health for

Figure IIb. Estimated and Projected Number of Adolescent Women Aged 10-14

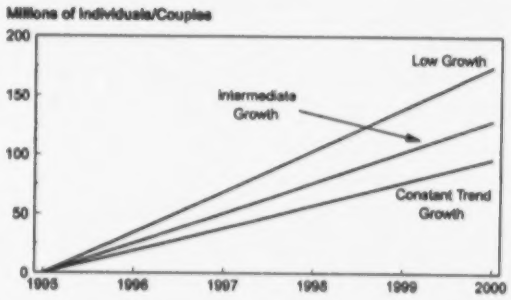


adolescents are parts of an integrated programme to make reproductive health a long-term and lasting achievement of the ICPD.

Reductions in potential users of family planning services

21. Reducing the level of resource mobilization below that envisaged by the Programme of Action would have dramatic consequences by the year 2000, as demonstrated in Figure III.[5] This figure shows net reductions in potential contraceptors: individuals or couples who would have chosen to use a contraceptive method for planning their childbearing, but will not be able to do so due to the decreased availability of and access to reproductive health and family planning services, in turn caused by resource shortfalls. In the year 2000, the reduced financial resource levels embodied in the Constant Trend Growth scenario (a $2.1 billion shortfall) would adversely affect about 97 million couples in this way. If donor resources for population activities were to be even more constrained, as in the Intermediate Growth scenario (a $2.9 billion shortfall), the effect on reproductive choice in developing countries would be starker still: around 130 million women and couples would find themselves without access to family planning services by the year 2000. Finally, under the Low Growth scenario, a net reduction of 170 million potential users would result.

Figure III. Additional Individuals/Couples Not Contracepting Due to Resource Shortfalls



22. These numbers represent substantial proportions of the total number of couples projected to be using family planning services in the year 2000 under the ICPD scenario. Even if the least grave (Constant Trend Growth) of the three scenarios were to occur, the number of couples having access to and using reproductive health and family planning services would drop by 16 per cent. The Intermediate Growth scenario would deprive 21 per cent of couples of access, and, in the worst-case scenario presented here (Low Growth), the potential number of contraceptive users would decrease by nearly 30 per cent.

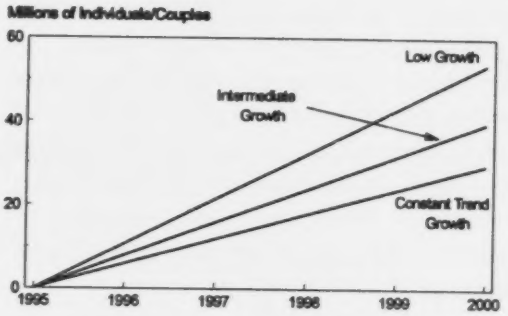
Increases in couples using traditional methods

23. Not all individuals or couples deprived of access to family planning services and to the range of modern methods will remain non-users. Even if these services are unavailable, a proportion of people will, on their own, use traditional methods such as periodic abstinence or withdrawal. Projecting users of traditional methods is important because such couples have much higher "method failure" rates than do users of modern methods. One study of this proportion,

using data from 36 countries, estimates the proportion of individuals/couples opting for use of a traditional method, rather than non-use, at 20 per cent. In this report, however, this proportion has been doubled to 40 per cent to assure that the assessment of negative consequences is on the conservative side (since users of traditional methods are better protected from the risk of becoming pregnant than are non-users).

24. Figure IV illustrates how the number of users of traditional methods will escalate under the three scenarios. Even under the most optimistic of the scenarios (Constant Trend Growth), the number of couples using traditional contraceptive methods, instead of more effective methods, would increase by 30 million couples, by the year 2000. Under the least favourable scenario, the additional number of users of traditional methods would reach 51 million. In effect, these couples would, because of circumstances of lower accessibility to affordable modern family planning services, be unwillingly adopting a less-than-ideal solution to their reproductive needs and risking unwanted reproductive outcomes.

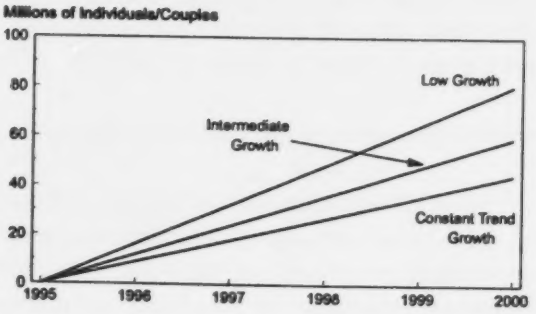
Figure IV. Additional Couples Using Traditional Methods of Contraception



Increases in non-contraceptors

25. The remainder of the millions of couples affected by decreased availability of services -- those who choose not to use a traditional method -- will remain as non-contraceptors. These are the individuals and couples who would have obtained reproductive health information and would have decided to exercise their reproductive right to plan the spacing and size of their family had reproductive health services been available. The additional non-contraceptors that result from applying the three scenarios of future ICPD implementation are shown in Figure V. By the year 2000, their numbers range from 44 million (Constant Trend Growth) to 80 million (Low Growth) and form a group at particularly high risk of unintended and/or unwanted pregnancies. These additional

Figure V. Additional Couples Using No Method of Contraception

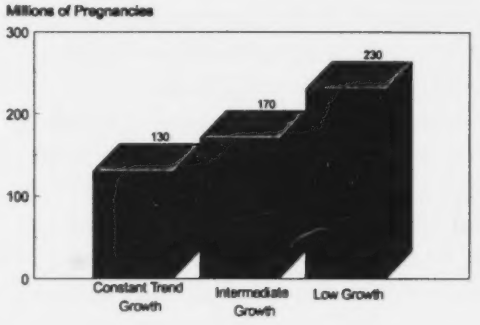


non-users may be compared to the roughly 340 million individuals/couples who are projected to not be using family-planning methods in 2000, even if the Programme of Action were fully implemented.

Increases in unintended pregnancies

26. As a result of not using any form of contraception whatsoever, or using traditional methods, millions of couples in the developing world will experience unintended and/or unwanted pregnancies. The cumulative number[6] of additional unintended pregnancies during the period 1995-2000 is shown in Figure VI for each of the three scenarios. The numbers are sobering, ranging from around 130 million unintended pregnancies under the best-case scenario to 230 million under the worst.

Figure VI. Additional Number of Unintended Pregnancies (1995-2000)

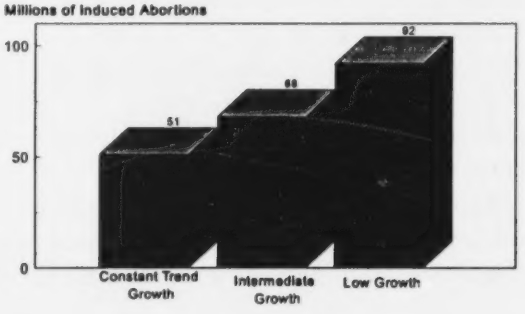


27. Even without contemplating the direct outcomes of these additional pregnancies (see below), the costs implied by these numbers, in terms of increased demand for antenatal health services and the additional opportunity costs from lost work time and other social contributions of the women who become pregnant, must be counted as substantial adverse developmental consequences of the large number of additional unintended pregnancies.

Increases in induced abortions of unwanted pregnancies

28. A major consequence of lack of access to family planning services is an increase in the number of induced abortions of unwanted pregnancies. As can be seen in Figure VII, the cumulative totals over the period 1995-2000 range from just over 50 million to more than 90 million, depending on the scenario.[7] Besides being a tragedy in its own right, the costs to the women undergoing the abortions -- as well as to the countries' health systems -- are enormous. Unsafe abortion is a major public health problem and a major cause of maternal deaths. Complications from unsafe abortions are usually among the leading causes of hospitalization of women in the prime reproductive age group.[8]

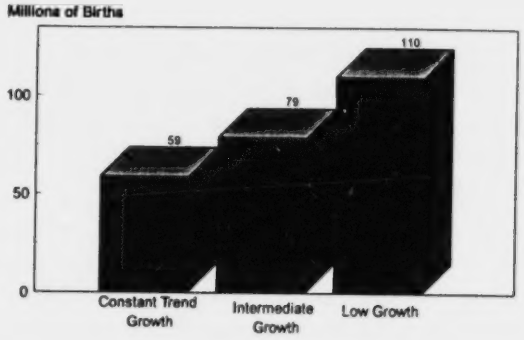
Figure VII. Additional Number of Abortions of Unintended Pregnancies (1995-2000)



Increases in unintended births

29. Cumulative totals for unintended and often unwanted births resulting from the large increase in unintended pregnancies are shown in Figure VIII for the three scenarios. As the figure indicates, cumulatively over the 1995-2000 period, 59 million to 110 million additional unintended births will occur depending on the degree to which ICPD implementation suffers from under-budgeting.[9] These extra births imply significant extra burdens in terms of health risks to the mother at time of delivery, extra demands on health care services, and a general dilution of resources available to the family which can be dedicated to investing in the human capital of the offspring. This is true at the micro-level, where families must spread their incomes over more family members, as well as at the macro-level, as public-sector budgetary allocations for social infrastructure become more strained.

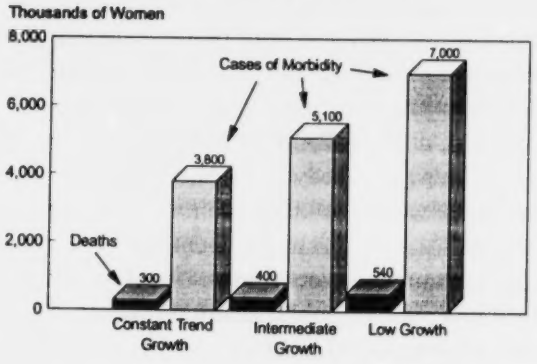
Figure VIII. Additional Number of Unintended Births (1995-2000)



Increased maternal mortality and morbidity

30. Another consequence of a lower rate of ICPD implementation, as depicted in the three scenarios, would be the additional toll on mothers who would die or suffer life-threatening ailments from causes related to pregnancy and childbirth (Figure IX). Again, cumulative estimates over the five-year period are shown -- 300,000 to 540,000 additional deaths. Additional maternal deaths would be a grave implication of lower-than-planned implementation of the ICPD Programme. In the year 2000 alone, additional maternal deaths may range from 99,000 to 180,000 deaths[10], a sizable proportion of the latest WHO global estimate of annual maternal deaths (585,000), implying a substantial rise in the global total for that year. In addition to the maternal deaths related to the increased number of unintended pregnancies, lack of resources would also make it more difficult to address high levels of maternal mortality through direct measures such as

Figure IX. Additional Maternal Morbidity and Mortality (1995-2000)



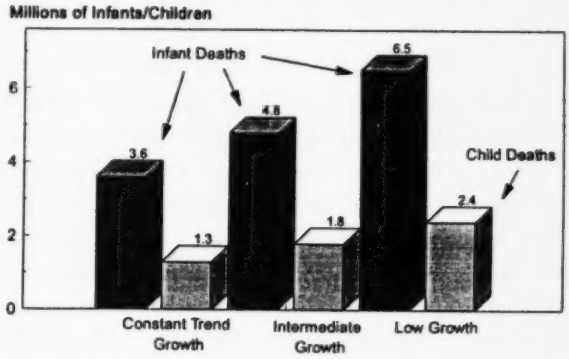
improved emergency obstetric care, better antenatal care and higher proportion of births attended by a health professional.

31. The incidence of maternal morbidity, although not well studied and difficult to measure, is known to be many times that of actual maternal mortality. The results of the analysis conducted for this report indicate that resource shortfalls could lead to between 3.8 million and 7 million additional cases of life-threatening maternal morbidity, depending on the scenario, over the five-year period.[11] In 2000 alone, the increased number of women affected would range from 1.3 million to 2.3 million, depending on the magnitude of funding shortfalls.

Increased infant and child mortality

32. Annually, around 125 million children are born in developing countries and countries with economies in transition. Of these, more than 7.5 million die before reaching their first birthday, and another 3.2 million die before reaching five years of age; over the five-year period, 1995-2000, this amounts to almost 38 million infant deaths and around 16 million child deaths. Figure X shows the additional deaths of infants and children (defined as ages 1-4) that would be added to these totals from a failure to meet the ICPD targets for implementation of the Programme of Action. Even under the most optimistic of the resource scenarios (Constant Trend Growth), an additional 3.6 million infants and 1.3 million children would be expected to die over the 1995-2000 projection period.[12] This figure rises to 6.4 million infant and child deaths in the Intermediate Growth scenario and to almost 9 million deaths in the Low Growth scenario. These additional deaths would be a direct consequence of the large number of additional unintended births noted above.

Figure X. Additional Infant and Child Mortality (1995-2000)



Consequences for the basic reproductive health component of the Programme of Action

33. To this point, the analysis has focused on implications of resource shortfalls for the family planning component of the ICPD Programme of Action. The second component of the ICPD "package" is concerned with basic reproductive health services and is estimated to cost around $5 billion in the year 2000. Since the Cairo conference, much work has been done on operationalizing this component, including work on the development of measures and indicators for monitoring reproductive health services. Nonetheless, the newness of this field is such that

little appropriate data exist, and some of the definitional issues are as yet unresolved in some operational areas.[13] It is thus not possible at this stage to quantify the effects of failure to fully implement the Programme of Action as was done above for the family-planning component. Consequences of under-funding this component will, therefore, be described mainly from a qualitative viewpoint.

34. In general, it is expected that resource shortfalls would constrain efforts to improve the quality of services, since funds available would likely to continue to be directed to maintaining existing services and standards. Lack of adequate funding will adversely affect the range of contraceptive methods available, technical competence of staff, provider-client information exchange and client-provider relations. Resource shortfalls will also tend to delay the introduction of new or improved contraceptive methods. Family planning clinics that do not offer a mix of contraceptive methods or that experience periodic stockouts of contraceptives will not be able to adequately service existing clientele, to direct interested users to methods appropriate to their needs and desires, or to attract new clients.

35. Situational analyses show that resource shortages have indeed affected quality of service of many programmes, particularly family-planning programmes which have been most widely studied. In many countries, a large percentage of service delivery points (SDPs) lack adequate infrastructure, basic equipment, contraceptive supplies, or educational materials for providing quality services. Many SDPs are not adequately staffed with competent service providers trained in the latest methods and techniques.

36. In the United Republic of Tanzania, for example, a large percentage of service delivery points throughout the country lacked basic equipment for providing quality services in 1992. More than three-quarters of health centres and hospitals did not have a speculum, nearly one-third lacked disposable gloves and 22 per cent and 15 per cent, respectively, did not have a stethoscope. The lack of such basic equipment is a major barrier to the expansion of services in the country and to the provision of quality reproductive health services, including family planning. Other quality problems affecting most service delivery points included lack of a well-ordered and usable client card system, infrequent supervisory visits and stockouts of specific materials. To lesser degrees, similar problems affected the quality of service delivery in Botswana and Kenya. Similar difficulties have been documented in Asia and Latin America as well.[14]

37. Information given to clients at clinics is an important issue in quality of care. Resource constraints in this area may result in under-staffed clinics and under-trained service providers, and, in turn, result in rushed visits, insufficient client/provider communication and poorer overall quality of service. Situation analyses in Ghana, Nigeria and the United Republic of Tanzania have shown many deficiencies in client/provider exchanges. These can result in clients not being able to exercise choice in their selection of contraceptive methods and in a lack of awareness of possible side-effects. A 1993 situation analysis in Pakistan found that although 94 per cent of

clients had discussed with their service providers how the contraceptive method worked and 62 per cent had discussed how to use the method, less than half of the service providers described possible side-effects and just over one third inquired about client questions. Similar practices have been observed elsewhere in Asia and in Latin America.

38. Recent research shows that service providers need to interact more dynamically with clients -- learn their needs and practices, address their questions, explore a wider range of reproductive health concerns, explain alternative treatments and methods, teach appropriate responses to possible side-effects and follow up on results. Yet the same situation analyses show that many staff have not received training in over five years and that periodic upgrading of skills is not routinely provided. Improvements in how health-care providers impart information and offer counseling to clients is crucial, and this will require greater training of the providers. The costs of such training will account for much of the total costs of improving services.[15]

39. Integrating family planning programmes with comprehensive reproductive health programmes is a major ICPD goal. Significant improvements in many dimensions of "programme effort" have been observed in previously weak and strong programmes over the past decade and a half. An analysis of the period 1989-1994, however, showed that management capacity suffered in mid-level programmes as they strained to keep up with increasing demand. Even strong programmes, on average, showed a decline in field and media outreach efforts (Bulatao, 1996). Resource shortfalls would only exacerbate these trends.

Consequences for prevention of STDs and HIV/AIDS

40. The third major component of the ICPD-costed population package includes the prevention of STDs, including HIV/AIDS. It includes mass media and in-school education programmes, promotion of voluntary abstinence and responsible sexual behaviour, and expanded distribution of condoms. This prevention programme was estimated by the WHO Global Programme on AIDS to cost $1.3 billion in the year 2000.

41. Estimating current expenditures for the prevention of STDs and HIV/AIDS, especially on a global level, has presented major difficulties. Besides the lack of data in many countries, or the inadequacy of reporting procedures, one of the most important difficulties lies in the fact that in many countries, accounting systems for health services are still not able to isolate total HIV/AIDS expenditures. UNAIDS has not, so far, attempted to estimate global spending on HIV/AIDS prevention programmes.

Economic impact of AIDS

42. The potential global economic impact of AIDS is not fully understood because of the multiple dimensions in which AIDS will affect economies. Besides the cost of unexpected loss of labour productivity resulting from AIDS-related morbidity and mortality, and of the treatment of

AIDS patients, AIDS education and research, and blood screening, there are other problems, such as an increase in the number of orphans, the breakdown of family support systems for the elderly and young, decrease in private savings, and potential real national population losses that will have serious economic impacts on individual countries, many of which already find themselves in dire economic situations.

43. A number of studies have been conducted to estimate the economic impact of AIDS. Basic economic models were used to show the likely effects of AIDS on the ratio of capital to labour and output per capita in the United Republic of Tanzania and Thailand. Results from both countries show that the spread of AIDS will have a serious, direct economic impact on development. The rise in morbidity associated with the AIDS epidemic will have the immediate effect of reducing labour productivity and increasing health-care spending. The Tanzanian study shows that without decisive policy action, AIDS may reduce the country's gross domestic product (GDP) in the year 2010 by 15 to 25 per cent, while per capita income levels are expected to decrease from anywhere between 0 to 10 per cent. Studies of the economic impact of AIDS in Thailand, one of South-East Asia's hardest hit countries, also portray severe problems for continuing the rapid economic growth that the country has experienced. In Thailand, it has been estimated that just in terms of the effects on worker productivity, savings loss and medical costs alone, the country will spend up to $8.7 billion by the year 2000. A simulation model for Thailand shows that the country's overall economic size would be between 15 and 20 per cent smaller than the no-AIDS projection and that GDP growth rates would be 15 to 23 per cent smaller than the no-AIDS projection (Nelson, 1996).

Population and development strategies

44. Failure to fully implement the ICPD Programme of Action would hinder necessary improvements in information systems for monitoring programmes and for devising appropriate population and reproductive health policies. In order for developing countries to develop appropriate policies, they need to improve the coverage and use of service statistics, client reports, socio-medical data on the prevalence and causes of reproductive health problems, demographic and health surveys, censuses, registration systems, sociocultural research and community studies. Knowledge, attitudes and practice surveys of reproductive health issues (including, *inter alia,* family planning, safe motherhood, STDs and HIV/AIDS, and adolescent sexuality) are required. The role of gender relationships needs further research. Understanding the content and context of interaction concerning reproductive health issues in communities and families is also an urgent topic for research. If the goals of the ICPD are to be met, research in all of these areas is essential. Shortfalls in financing for the ICPD Programme of Action will also inevitably impose constraints on these data collection and research activities.

Advocacy and education efforts

45. The ICPD's agenda sees advocacy and educational efforts as an important tool for meeting the reproductive health needs of the world's women and men. One important area is the promotion of gender equity and equality and the empowerment of women. The ICPD realized that these are important development goals in themselves and that, moreover, none of the other goals are attainable unless women have the possibility of realizing their own reproductive choices. This is to be carried out by a number of means, including, in the words of the Programme of Action, "achiev[ing] universal access to quality education ... and eliminat[ing] gender disparities in access to, retention in, and support for, education." (para. 11.5) These goals require further resources, beyond those costed by the ICPD for the basic package of integrated population and reproductive health.

46. Moreover, the ICPD establishes a firm groundwork for advocacy activities that would work to empower women as well as to meet the other goals of the Programme of Action. If resources are not available to carry out these advocacy activities, it will be harder for millions of girl children and women to realize their rights and opportunities and enjoy equal access to nutrition, education and health. Many more girls than need be will suffer the consequences of harmful traditional practices, including female genital mutilation. Many more women will never realize their potential because, constrained by their reproductive roles, they will be unable to avail themselves of educational and employment opportunities. Many people, especially girls and women, will be denied their human rights, including their reproductive rights.

Developmental consequences

47. The consequences presented in this section have dealt directly with the costed ICPD "package" that focuses on reproductive health, family planning, STDs and population policy. Beyond the specific and direct consequences that have been demonstrated here, however, there are wider, developmental consequences associated with higher population growth rates -- and population distributions more highly skewed towards young ages -- that would also flow from additional unintended pregnancies. Although not included in the present analysis, these negative consequences on the environment, on human development, on women's empowerment and on poverty are real and will undoubtedly affect the development potential and performance of countries.

IV. THE NEXT FOUR YEARS

48. Section III of this report highlighted several important consequences that would likely follow from the failure to increase global allocations of resources to the level needed to reach the resource targets set out in the ICPD Programme of Action. This section briefly explores future actions on the part of donor countries -- countries in the Development Assistance Committee of

the Organisation for Economic Cooperation and Development -- to strengthen their commitment to the full implementation of the Cairo agenda.

49. Annex table 3 presents actual (1995) levels of assistance for population as well as possible outcomes for the year 2000. The level of external funding for that year, as set out in the Programme of Action, should reach $5.67 billion. International assistance for population activities, however, is made up of several components, only the largest of which is that supplied directly by donor countries. (The other components are provided by development banks, multilateral organizations, foundations and other private institutions.) Using the observed 1994-1995 distributions of assistance as a baseline, it is estimated that donor countries as a group should directly contribute around $3.57 billion in the year 2000 towards realizing the Programme of Action.[16]

50. As can be seen from the first column of Annex table 3, in 1995 donor countries directly contributed around $1.37 billion for population activities. (Another $672 million was provided indirectly by donor countries through their contributions to international financial institutions and other multilateral institutions.) The increases in donor assistance from 1993 to 1994 (25 per cent) and from 1994 to 1995 (30 per cent) were very encouraging.

51. Since the Cairo Conference a number of donor countries have pledged to increase their support. These include, in particular, the United States, Germany, Japan, United Kingdom, Netherlands, Denmark, Switzerland and Australia as well as the European Union. In 1994, for instance, the Japanese Government announced a new Global Issue Initiative on Population and AIDS through which $3 billion will be allocated, from 1994 to 2000, to address global population problems and prevent the spread of HIV/AIDS. The German Government has committed itself to spend more than $2 billion over the period 1995-2000 on population programmes and has become the second largest donor of population assistance after the United States. After the ICPD, the United Kingdom pledged to increase its assistance for population and reproductive health by approximately 65 per cent, for a total of about $160 million over the following two years.

52. Further examples include Denmark which, in 1996, increased its contribution to UNFPA to $47 million, of which $8.6 million is earmarked for additional ICPD activities in sub-Saharan Africa. Following the urging of the Parliament of the Netherlands to increase population funding as a proportion of the overseas development budget, Dutch policy now encompasses a 4 per cent target for population assistance. This will bring the Netherlands funding level for international population assistance to about $125 million by the year 1998. The Government of Australia is in the middle of a four-year initiative through 1998 to earmark $130 million to population and family-planning programmes in developing countries. After the severe economic recession in the early 1990s, Finland has gradually been restoring the level of its population assistance to earlier levels. Finally, the European Commission has set a policy target of approximately $375 million on programming in the area of population and reproductive health by the year 2000. An

agreement for more than $31 million between the European Commission and UNFPA was recently reached on an important initiative involving population programmes in several Asian countries.

53. Donor support, however, remains uneven: while donors such as Denmark, Finland, Netherlands, Norway, Sweden, United Kingdom, United States and other countries mentioned above have maintained or increased their commitment to the ICPD agenda, other donor countries have provided little funding compared either to the size of their economies or to their total ODA. Overall, donor support for population activities would have been almost $1 billion higher in 1995 if all donors had allocated 4 per cent or more of ODA to population programmes (a level reached only by Finland and the United States).

54. To reach the ICPD resource targets in 2000, the distributional pattern among donor countries could be either maintained as it was in 1995 or move towards a fairer distribution of responsibilities. For example, the distribution of assistance among donor countries could be related to countries' capacity to pay, as reflected by the relative size of the gross domestic product (GDP) of each donor country.

55. A hypothetical distribution of population assistance for 2000 -- when the first resource goals agreed at the ICPD are to be met -- could thus be based on the proportionate size of each country's GDP.[17] The amounts shown in column two of Annex table 3 are based on this hypothetical distribution. These hypothetical contributions of donor countries for population assistance in 2000 vary according to the size of their economies. The third column of the table shows the annual rates of growth in population assistance that would be needed over the period 1995-2000 to meet the hypothetical amounts shown in column two. As can be seen, several countries (Norway, Denmark, the Netherlands, Sweden and Finland) already contribute a relatively high proportion of their GDP towards population programmes. Australia, the United Kingdom and the United States would have to roughly double their population assistance over 1995 levels to reach the targets implied in column two of the table. Countries that have so far contributed relatively little to population relative to the size of their economies would obviously have to greatly increase their funding levels in order to reach these year-2000 targets.

56. As has been seen, domestic flows from developing countries and countries with economies in transition (including estimates for the private sector) are currently estimated to amount to about 78 per cent of total resources available for population programmes. To keep on track to meet the resource targets of the Programme of Action, domestic financial flows will have to grow by around 8.5 per cent annually through the year 2000. This will certainly be difficult, if not impossible, to achieve, particularly in certain regions, including many countries of sub-Saharan Africa. However, given the mix of public and private resources that make up this component of the global domestic resource picture and the strong commitment to balancing population growth and socio-economic development at all levels of society, there is reason to expect that this level of growth is sustainable at an aggregate level.

57. At the same time, however, wide variation exists among developing countries in both their commitment towards ICPD resource mobilization as well as in their capacity to domestically finance population activities. In fact, the overall percentage of 78 per cent is considerably skewed by a few large developing countries, such as China, India and Indonesia, whose population programmes are to a great extent self-financed: this means that there are many other developing countries where a much lower proportion of programme financing is from domestic resources. This is particularly the case in sub-Saharan Africa and other low-income sub-regions where external resources will have to fill the gap if the implementation of the ICPD is to proceed as agreed in Cairo.

UNFPA's future resource level

58. If the ICPD targets through 2000 are to be met, growth in size and capacity would be required from the three principal channels for donor funding -- bilateral programmes, multilateral programmes and NGO-executed programmes. In recent years, around 27 per cent of donor assistance for population has been channeled through UNFPA. In the short term, to the year 2000, this proportion may be assumed to stay constant since the other channels of assistance will be hard pressed to expand their capacity under conditions of high growth in demand. This implies that by 2000 the Fund's resources would reach about $960 million a year.

59. An increase in UNFPA resources is likely to include growth in both core and multi-bilateral resources. The potential for growth in the multi-bilateral field is particularly strong. From a level of $12 million-$15 million per year in the early 1990s, multi-bilateral arrangements are estimated to currently total about $25 million. With the recent agreement with the European Commission on a regional programme in several Asian countries, UNFPA's multi-bilateral channel could well expand further. Moreover, in 41 country programmes, either recently approved by the Executive Board or that are now being prepared for submission to the Board, the multi-bilateral components incorporated in the programmes total more than $132 million. The possibilities for expanding cooperation at the country level between UNFPA and bilateral donors are great.

60. Debt-swap agreements are another potentially large source of additional resources that could also be managed through the Fund but which, so far, have not been tapped. Approximately $2 trillion is owed by countries where UNFPA operates. Of that amount, over $800 billion is owed bilaterally (i.e., government-to-government debt). UNFPA would like to encourage agreements between lenders and debtors to forgive a portion of debt in exchange for the use of local resources by debtor countries for their population and reproductive-health programmes as well as for other social development programmes. So far, debt-swap agreements have been managed by multilateral organizations and NGOs. In order to further the implementation of the ICPD Programme of Action, UNFPA could help broker agreements by assessing the priority areas of population programmes that most need local financing.

61. UNFPA's growing leadership in procurement of contraceptives and primary health-care supplies is shown by the efforts of the Global Initiative on Contraceptive Requirements and Logistics Management Needs and the Global Contraceptive Commodity Programme to help countries better cope with emergency procurement needs. Contraceptive procurement by UNFPA has quadrupled over the last five years. UNFPA has also taken on the commitment to provide emergency procurement of contraceptives and other reproductive-health supplies in emergency humanitarian relief situations. To facilitate prompt response to such emergency requests and to avoid disruption to national contraceptive provision programmes UNFPA has now established limited stockholdings of essential contraceptives. Such efforts point to another avenue by which UNFPA participation in channeling international population assistance to developing countries may be enlarged.

V. CONCLUSION

62. This report has examined the consequences of resource shortfalls in terms of meeting the goals expressed in the ICPD Programme of Action over the period 1995-2000. It is meant to provide the Executive Board with some quantitative estimates of reproductive-health consequences if the implementation of the Programme of Action were not to be fully achieved. The earlier conference room paper which is the foundation for this report has been re-examined and strengthened by bringing to bear all pertinent empirical information that is available, and the methodology used is fully described in the Annex to this report. Although all projections into the future are in a sense hypothetical, demographic prognoses in general benefit from extensive bases of empirical data and in practice have proven to be quite robust. Even though the analysis presented in this report is based on a great deal of empirical data, all quantitative estimates should be read as orders of magnitude, not mathematical certainties.

63. The magnitude of the negative effects of failing to fully implement the ICPD Programme of Action, described in Section III of this paper (and Annex table 1), should be sobering to all who are committed to the goals of the ICPD. If the implementation of the Programme of Action were to fall short of the agreed targets and goals, many reproductive-health outcomes would suffer incrementally. Millions of individuals or couples who would have used family-planning services would not be able to do so because fewer services will be available or accessible. Many millions more unintended pregnancies would thus result over this period and millions of these additional pregnancies would end in abortions. Hundreds of thousands more women would die than otherwise, either in childbirth or while undergoing unsafe abortions. Several times that number of mothers would suffer life-threatening morbidities. Millions of unwanted children, born from these unintended pregnancies, would die in their infancy or early childhood. While the exact estimates may change when more data become available, the order of magnitude of these grave -- yet avoidable -- consequences will not change.

VI. ELEMENTS FOR A DECISION

64. The Executive Board may wish to:

(a) Take note of the report on the consequences of resource shortfalls in meeting the goals of the ICPD up to the year 2000 and the comments made thereon by the Executive Board;

(b) Reiterate the need for the continued commitment on the part of all countries of the world to make sufficient resources available for the successful implementation of the Programme of Action of the International Conference on Population and Development.

NOTES

1. These estimates of domestic flows need to be treated with some caution as they are based on incomplete data. UNFPA has signed an agreement with the Netherlands Interdisciplinary Demographic Institute (NIDI) to collaborate on a system of data collection and analysis for both domestic and ODA resource flows, aimed at improving knowledge on the global resource situation for population.

2. In the incorporation of these estimates in the Programme of Action it was explicitly recognized that a large portion of the joint costs of family planning and other reproductive health services are included in the family planning portion of the estimates and that further analyses would be needed to clarify the allocation of joint inputs.

3. All expenditure estimates include the cost of external technical assistance. Note, also, that economies of scale play an important part in determining average costs per users. (See United States Agency for International Development, Evaluation Project, "Family Planning Expenditure/Cost Study", internal documents.) Economies of scale were explicitly built into the analysis of costs per user in the estimation of resource requirements for ICPD (UNFPA, 1994a).

4. The methodology used in this report, in terms of additional traditional users, pregnancy rates, abortion rates, birth rates, and spontaneous abortion rates, follows that developed by the Alan Guttmacher Institute in association with The Futures Group, Population Action International, Population Reference Bureau and The Population Council (AGI, 1996). See the Annex for a description of the methodology.

5. Resource shortfalls have intensifying and cumulative implications for future years. This analysis presents only short-term implications.

6. Cumulative totals are the sums of all events (in this case unintended pregnancies) occurring in the years 1996, 1997, 1998, 1999 and 2000. Note that around one third of the cumulative effects occur in the last year of the projection period since resource shortfalls are assumed to be zero in 1995 and increase linearly through the year 2000.

7. The number of additional abortions may be over-estimated to the degree that motivation for fertility limitation may not be high among non-contraceptors. In regions where recourse to abortion is rare, this over-estimation may be significant; however, where abortion levels are already high, the parameter used (see Annex) might even under-estimate the number of abortions.

8. In the year 2000 alone, the final year of the projection exercise, 17 million-31 million additional abortions would have been resorted to depending on the scenario.

9. Additionally, spontaneous abortions and stillbirths will increase as a result of a lower level of available reproductive health services. For the Constant Trend Growth scenario, an additional 16 million such outcomes can be expected, 22 million for the Intermediate Growth scenario, and 30 million for the Low Growth scenario.

10. A simple computational error made in the conference room paper (DP/FPA/1997/ CRP.1) produced much lower estimates of maternal events.

11. It is assumed that there are 13 cases of life-threatening maternal morbidity for every maternal death (see UNFPA, *State of World Population Report 1997*). See the Annex for further discussion concerning the measurement of maternal mortality and morbidity.

12. In the case of children aged 1-4, the cumulation of deaths is over a longer period since children born in the year 2000, for example, would still be at risk of child mortality until the year 2004. All such children, however, would have been born during the period under study (1995-2000).

13. It is also difficult to disentangle costs for the two components because, as stated in the Programme of Action, delivery-system costs (e.g., infrastructure costs) are included under the family-planning component. As methodology and measurement improve it may be easier to separate the costs under each component or more precisely identify joint costs.

14. Examples are taken from the findings of The Population Council's situation analyses conducted in various countries: Bruce, 1996; Miller, 1996; and Population Council, 1991.

15. These points are emphasized in a forthcoming National Research Council report (Tsui, Wasserheit and Haaga, 1997).

16. The amounts referred to in this section are donors' primary funds, i.e., funds specifically earmarked for population activities, and do not include other ODA contributions that donors make to development banks, multilateral organizations (other than UNFPA), or other organizations -- some of which may ultimately be destined for population activities.

17. GDP estimates for 1995 were used for a constant reference point for the hypothetical distributions. (Source: World Bank, 1997, *World Development Indicators, 1997*.) No assumptions are made or implied about future GDP growth.

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MEETING THE GOALS OF THE ICPD: CONSEQUENCES OF RESOURCE SHORTFALLS UP TO THE YEAR 2000

Report of the Executive Director

ANNEX

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METHODOLOGY AND DATA

1. At the 1997 annual session of the Executive Board, the general discussion on the first version of this report (DP/FPA/1997/CRP.1) indicated a desire on the part of the Board for a revised report containing a more thorough description of the methodology used to calculate the consequences of resource shortfalls, including references to the data sources used. The purpose of this Annex is to meet both of those requests. A list of references is provided in this Annex and cross-referenced, as appropriate, in the text, notes and tables.

2. The computational method used here is based on a 1996 study by the Alan Guttmacher Institute (AGI) which looked at potential negative consequences if overseas family planning programmes experienced declines in funding due to a budget cut of 35 per cent proposed for United States international assistance (AGI, 1996). The AGI study benefited from the knowledge and expertise of several other organizations including The Futures Group, Population Action International, the Population Reference Bureau and The Population Council. While the analysis of this report uses the basic methodology and much of the data of the AGI study, it also extends it in certain ways, such as using disaggregated, regional calculations where data availability made this possible and extending the topics covered (maternal morbidity and child mortality).

3. As explained in section III of the report, the 1994 UNFPA study that estimated the cost requirements for the family planning component of the ICPD Programme of Action relied on empirical estimates of the extent of "unmet need" for family-planning services available from many recent demographic and health surveys (and other surveys as well).[1] These estimates were combined with estimates of per user average costs to obtain first regional, then global, resource requirements (UNFPA, 1994b).

4. In this report, the reverse procedure is used. That is, resource shortfalls are divided by per user average costs to project numbers of individuals/couples with "unmet needs", i.e., additional couples/individuals who would be constrained from implementing their reproductive desires. Depending on the scenario, the global shortfall in resources is translated into an estimate of the reduction in the number of potential users of family-planning services -- those who would no longer have access to such services -- for each year in the period 1995-2000. These calculations are done by region and then aggregated to the global level. The basic data used in the analysis and the sources of data are given in Annex table 2. The reader is invited to refer to that table while following the details of the methodology as they are explained below.

5. Once the reduction in the number of potential users has been calculated, the next step is to estimate the proportion of those potential users who will decide to use a traditional contraceptive method (i.e., periodic abstinence or withdrawal). About 26 per cent of "acceptors"

(individuals/couples accepting a particular contraceptive method either from a family-planning service agency or on their own) in developing countries in any given year normally "accept" traditional methods (see row 6 of Annex table 2). The "reduction in potential users" is therefore itself lowered by this proportion.

6. After the number of potential users has been reduced by subtracting these "willing" users of traditional methods, the remainder represents individuals/couples who would have used a modern method of contraceptive had appropriate services been available. The method assumes that a large proportion of these people would also opt to use (or "accept") a less effective but low-cost traditional method as a substitute for a modern method that is not available due to under-funding of services. This proportion has been conservatively estimated at 40 per cent (see row 7 of Annex table 2). This is the percentage used in the study of the consequences of reduced support from United States for family planning programmes (AGI, 1996). For consistency, the same percentage is used in this report even though its use tends to under-estimate negative consequences because in the AGI study current contraceptive users were affected by funding cuts whereas in this analysis potential future users are affected. The former group would tend to be more motivated to replace the current use of a modern method by a traditional method of contraceptive than would potential users.

7. The third step in the method is to estimate the number of additional unwanted or unintended pregnancies that would occur in each year during 1995-2000. The number of unwanted pregnancies is the sum of two estimates: pregnancies to those individuals/couples adopting traditional methods of contraception (i.e., those described in paragraph 5 above) and pregnancies to the group of potential users who will not be using any contraceptive method at all. The multipliers -- pregnancy rates *per annum* -- are found in rows 8 and 9 of Annex table 2. The pregnancy rate of traditional contraceptive users is estimated at 30 per cent and of non-contraceptors at 75 per cent, both rates being constant throughout the period.

8. The fourth step is to estimate the number of unintended/unwanted pregnancies that will be terminated by induced abortions. The ratio used, 40 per cent of pregnancies, is based mainly on WHO data (see Annex table 2, row 10, for references). Admittedly, data on abortion are incomplete and suffer from reporting deficiencies (usually under-reporting). Although some data for several regions are available, it was felt that coverage within regions was too patchy to attempt regional estimates of additional abortions due to funding shortfalls. Thus, a global ratio (40 per cent) was used. It may be noted that data from Latin America, arguably the developing region with the best data on the incidence of abortion, generally imply ratios above 40 per cent (AGI, 1994). At the same time, it is understood that because the focus of this analysis is potential future users of contraceptives, motivation to abort unplanned pregnancies may be somewhat lower than among current users, the subject of the AGI study. In the absence of more refined

data, the AGI estimate of 40 per cent was retained in this analysis even though it may tend to over-estimate additional induced abortions.

9. The fifth computational step is to estimate the number of unintended births that result from the non-terminated pregnancies. The global proportion used is 47 per cent of the unintended pregnancies (see Annex table 2, row 11). The remaining 13 per cent of pregnancies are assumed to end as spontaneous abortions and stillbirths. A global proportion was also used here due to the paucity of regionally disaggregated data on spontaneous abortion.

10. Next, maternal deaths are computed from the estimated number of unintended live births (Annex table 2, row 12). In this case, regional data are available from revised estimates prepared by WHO/UNICEF, ranging from 61 deaths per 100,000 births in countries with economies in transition to 981 deaths in sub-Saharan Africa. Related to maternal mortality is maternal morbidity. Maternal morbidity has not yet been well measured, but is known to be a major health problem. The ratio of cases of morbidity to maternal deaths used in this analysis (Annex table 2, row 13) is 13 morbidity cases per maternal death. This is probably a gross under-estimate of the true proportions of maternal morbidity, but it was felt that any report on negative consequences would be incomplete without including an estimate of morbidity consequences even if it were an under-estimate. One recent study reported ratios in Bangladesh, Egypt and India for life-threatening (malaria, hemorrhage or convulsions during pregnancy) morbidities higher than 13 cases per death, respectively (Fortney and Smith, 1997). Ratios for life-threatening or serious (edema, hypertension, long fever, severe vomiting, etc.) morbidities were far higher (*ibid.*). In view of ongoing methodological developments, it was felt that a conservative value for this parameter should be used.

11. The next computation involves additional infant deaths (i.e., to children less than one year old) that could be attributed to resource shortfalls. Infant deaths are calculated from unintended births by applying infant mortality rates. Regional rates were used (Annex table 2, row 14), ranging from 19 infant deaths per 1,000 live births in the countries with economies in transition to 91 deaths in sub-Saharan Africa.

12. Finally, additional child deaths (i.e., to children 1-4 years of age) are computed from unintended births using regional under-five mortality rates (Annex table 2, row 15). Since estimates are available only for the period 1990-1995, all rates were reduced by 10 per cent to reflect possible improvements over the subsequent five years.[2] The number of deaths of children aged 1-4 is the difference between under-age-five deaths and infant deaths. Note that although the projection period for determining consequences is 1995-2000, child deaths may take place beyond the year 2000. For example, a child born in 2000 who dies at age four, will die in 2004.

13. The other three components of the ICPD's costed population and reproductive health package were originally derived using per capita cost estimates. It is not possible at this time, because of lack of data as well as a dearth of established indicators, to present consequences of lower levels of resources in quantitative terms for these components. Qualitative assessments have therefore been given for impacts on basic reproductive health services (paras. 33 to 39 of the main text) and prevention of HIV/AIDS (paras. 40 to 43).

14. A number of assumptions are implicit in the analysis, some of which may tend to cause consequences to be under-estimated while others may produce a tendency towards over-estimation. One assumption is that marginal costs are equated with average costs, the only cost information available. However, this is a conservative assumption since, generally speaking, marginal costs should be lower than average costs because of increasing economies of scale. The report also assumes that all countries would share equally in resource shortfalls. But some countries (those politically very committed to family-planning programmes) are not likely to reduce resources at all. Since committed countries would generally also be countries with higher contraceptive prevalence rates and lower costs-per-user, assuming homogeneity probably also under-estimates the number of additional non-users.

15. When official programmes suffer reductions in resources, some sufficiently motivated individuals/couples may pay out of their own pockets for privately supplied services. Similarly, NGOs that get reduced government or donor support may also increase fees for services. Substitution of publicly supplied services by privately supplied services, however, does not mean reduced resources, merely an altered distribution of domestic resources between public and private financing. It is not certain what effect such substitution would have on the estimation of consequences. The study likewise assumes no gains in efficiency that might result from financial adversity. Effectively, such outcomes would tend to lower the costs-per-user that have been assumed to be constant. To the extent that efficiencies do occur, consequences would be somewhat over-estimated. It should be noted, nonetheless, that attempts to introduce efficiency measures (such as cost recovery) have usually led to lowering service access to the poorest clients. Furthermore, recent operations research seems to show that only modest success has been achieved so far in lowering costs (Levin *et al.*, 1997).

16. Each consequence explored in the report is also assumed to take place in isolation without affecting other parts of the system. Such interactions do occur, but the general rates that are used in a sense have the interactions already built-in. Thus, the interactive effect of one consequence on another should be quite small.

17. A final assumption relates to traditional contraception. A certain proportion of "potential non-users" (those not using contraception because information and/or services never reached

them) will use traditional methods. The AGI study assumed a high proportion (40 per cent) because it was looking at programme cut-backs which would largely affect highly motivated users. In the case presented here, however, the general motivation may be lower, and a lower proportion therefore may be more realistic. This conservative assumption (made in the absence of data) should, if anything, lead to under-estimation of consequences.

18. The important point to keep in mind when considering the data used in this report and the assumptions made in applying the methodology is that the quantitative estimates reported here should be thought of as representing ranges rather than exact quantities. Viewing the estimates in this way, however, does not detract from the seriousness of the analytical findings on the negative repercussions of failure to fully implement the Programme of Action.

NOTES

1. Average costs per user of family planning services are key data for the methodology used here. Several sources were used for estimating these costs: UNFPA, 1994b; Bulatao, 1985; Gillespie *et al.*, 1989; Herrin *et al.*, 1996; Kocher and Buckner, 1991; Knowles and Wagman, 1991; Lande and Geller, 1991; Nortman, 1982; Speidel, 1983; Thompson *et al.*, 1996a; Thompson *et al.*, 1996b; World Bank, 1993.

2. A 10 per cent improvement mirrors the average improvements in infant mortality rates that have been recorded over the last decade.

Table 1. Consequences of Shortfalls in Resources for the ICPD Programme of Action

	Year/ Period	Constant Trend Growth Scenario	Intermediate Growth Scenario	Low Growth Scenario
Reductions in potential users of FP services	2000	97 million (individuals/couples without access to FP services)	130 million (individuals/couples without access to FP services)	170 million (individuals/couples without access to FP services)
Increases in individuals/ couples using traditional methods	2000	30 million (individuals/couples)	40 million (individuals/couples)	54 million (individuals/couples)
Increases in non-contraceptors	2000	44 million (individuals/couples)	59 million (individuals/couples)	80 million (individuals/couples)
Increases in unintended pregnancies	2000	42 million (pregnancies)	56 million (pregnancies)	76 million (pregnancies)
	1995-2000	*130 million*	*170 million*	*230 million*
Increases in induced abortions of unintended pregnancies	2000	17 million (abortions)	23 million (abortions)	31 million (abortions)
	1995-2000	*51 million*	*68 million*	*92 million*
Increases in unintended births	2000	20 million (births)	26 million (births)	36 million (births)
	1995-2000	*59 million*	*79 million*	*110 million*
Increased maternal mortality	2000	99,000 (deaths)	130,000 (deaths)	180,000 (deaths)
	1995-2000	*300,000*	*400,000*	*540,000*
Increased maternal morbidity	2000	1.3 million (cases)	1.7 million (cases)	2.3 million (cases)
	1995-2000	*3.8 million*	*5.1 million*	*7.0 million*
Increased infant mortality	2000	1.2 million (deaths)	1.6 million (deaths)	2.2 million (deaths)
	1995-2000	*3.6 million*	*4.8 million*	*6.5 million*
Increased child mortality	2000	440,000 (deaths)	590,000 (deaths)	800,000 (deaths)
	1995-2000	*1.3 million*	*1.8 million*	*2.4 million*

Note: ***Cumulative totals for 1995-2000 are shown in italics.***

Table 2. Summary of Rates Used to Estimate Consequences of Resource Shortfalls

Rate or Measure	Year/ Period	Value Used in Report	Sources*
1. Women aged 15-49, developing countries	1995 2000	1,132 m. 1,254 m.	UN/DESIPA, 1996c, pp. 117f.
2. Women aged 15-49, transition countries	1995 2000	97 m. 100 m.	UN/DESIPA, 1996c, pp. 117f.
3. All contraceptive users, developing countries	1995 2000	470 m. 551 m.	UN/DESIPA, 1996c, p. 33
4. All contraceptive users, transition countries	1995 2000	60 m. 62 m.	UNFPA, 1994b, p. 10
5. Estimated regional average costs per user	1995 2000	$8.76 to $33.33 $8.37 to $28.33	UNFPA, 1994b, p. 10
6. Estimated proportions of acceptors by contraceptive method	1995-2000	Sterilization 7 % IUD 17 % Traditional 26 %	UNFPA, 1994a, p. 22; VCIOM, 1997, table 15
7. Proportions adopting traditional contraceptive method	1995-2000	40 %	AGI, 1996, p. 4. See also: AGI, 1995
8. Pregnancy rates (traditional users)	1995-2000	30 %	AGI, 1996, p. 4. See also: Hatcher *et al.*, 1994; Moreno and Goldman, 1991; Jones, 1991; Jones and Forrest, 1992
9. Pregnancy rates (non-users)	1995-2000	75 %	AGI, 1996, p.4. See also: Hatcher *et al.*, 1994
10. Induced abortions per unintended pregnancy	1995-2000	40 %	AGI, 1996, p. 4. See also: WHO, 1994; Henshaw, 1990; AGI, 1995; AGI, 1994; DHS survey results
11. Proportion of pregnancies resulting in live births	1995-2000	47 %	AGI, 1996, p. 4. See also, AGI, 1995; AGI, 1994
12. Regional maternal mortality ratios (deaths per 100,000 births)	1995-2000	61 to 981 (average = 480)	WHO/UNICEF, 1996, pp. 9f.
13. Maternal morbidity rates (cases per maternal death)	1995-2000	13	UNFPA, 1997, p. 19. See also, Fortney and Smith, 1997; Philippines, 1994
14. Regional infant mortality rates (deaths per 1,000 births)	1995-2000	19 to 91 (average = 62)	UN/DESIPA, 1996a
15. Regional child mortality rates (deaths per 1,000 births)	1995-2000	21 to 141 (average = 81)	UN/DESIPA, 1996b, p. 266

* See the list of reference accompanying the Annex.

Table 3. Donor Assistance for Population in 1995 and Possible Patterns for 2000

	Population assistance in 1995 (1) ($ millions)	ICPD target reached using GDP (1995) distribution (2) ($ millions)	Annual rate of growth to meet ICPD resource target (3) Per cent
Australia	27	57	16
Austria	3	38	68
Belgium	6	44	51
Canada	37	93	20
Denmark	50	28	–
Finland	22	21	–
France [a]	13	252	80
Germany	145	395	22
Ireland	3	10	28
Italy	4	178	109
Japan	94	837	55
Luxembourg	1	3	26
Netherlands	87	65	–
New Zealand	1	9	51
Norway	47	24	–
Spain [a]	1	93	176
Sweden [a]	45	37	–
Switzerland	17	50	24
United Kingdom	98	180	13
United States	667	1,157	12
TOTAL [b]	1,368	3,570 [c]	21

Source: UNFPA *Global Population Assistance Report, 1995*, forthcoming.

[a] For France and Spain, 1993 data were used. For Sweden, 1994 data were used.
[b] Due to rounding, columns may not sum exactly to totals.
[c] Reaching the necessary $5.67 billion would also require $2.1 billion from development banks, multilateral organizations and private institutions.

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A. Introduction

1. The Executive Director presents in this report a summary of the financial situation of the United Nations Population Fund (UNFPA) for 1996.

2. For comparison purposes, financial information pertaining to 1995 is also included in the text and tables of this report. Tables 11, 12 and 13 highlight financial trends for the past 10 years.

B. Overview

3. Table 1 shows a comparison of income and expenditures for 1995 and 1996. Total income in 1996 amounted to $308.8 million and total expenditures to $300.3 million. This resulted in an excess of income over expenditure of $8.5 million. However, surplus general resources brought forward from 1995 amounted to $23.7 million. Thus, after adjusting for surplus income in 1996 and transferring $5 million to the Global Contraceptive Commodity Programme (GCCP), unspent general resources to be carried forward to 1997 total $27.2 million.

C. Income

4. Total income in 1996 decreased by $3.8 million (1.2 per cent) from the 1995 income level ($312.6 million). Total contributions pledged by 95 Governments in 1996 were $302.6 million, a small decrease of $0.2 million in dollar terms from the previous year (1995: $302.8 million). Table 3a includes a summary of donor pledges for 1996 as compared to 1995; table 3b includes donor pledges and payments for 1996. Of UNFPA's major donors, significant increases in contributions were pledged by Australia, Belgium, Denmark, Finland, Italy, Japan, the Netherlands and the United Kingdom. The cumulative outstanding balance of unpaid pledges for 1996 and prior years is $70.9 million. Of this amount, approximately $54.4 million relates to a pledge for 1996, which was received on 27 January 1997. Another $15.2 million relates to the balance of a 1996 pledge, which is being paid in installments through September 1997.

5. Throughout 1996, UNFPA's cash holdings were maintained in relatively stable major currencies, such as the United States dollar. Interest income amounted to $5.1 million (1995: $7.6 million), while other miscellaneous income and adjustments, including gains and losses on currency exchange, totaled $1.0 million (1995: $2.2 million, see table 1).

D. Programme expenditures

6. As shown in table 4, total project expenditures in 1996 were $216.5 million (1995: $230.9 million), a decrease of $14.4 million (6.2 per cent). United Nations agencies (including the regional commissions) executed projects amounting to $27.2 million (1995: $37.0 million), constituting 12.6 per cent of total project expenditures in 1996. Table 4 also shows the percentage breakdown of project expenditures by United Nations executing agencies for 1995 and 1996. Governments,

assisted by UNFPA country offices, executed projects amounting to $65.4 million in 1996 (1995: $50.6 million), representing a substantial increase (29.2 per cent) over 1995, and accounting for 30.2 per cent of total project expenditures in 1996. UNFPA-executed projects totalled $91.1 million in 1996 (1995: $108.6 million), a decrease of 16.1 per cent. Of this amount, $31.5 million (1995: $46.4 million) is in respect of procurement assistance undertaken on behalf of Governments. Expenditures for projects executed by non-governmental organizations (NGOs) (which includes intergovernmental institutions and other agencies) decreased by 5.8 per cent from 1995 to $32.7 million in 1996 (1995: $34.7 million), constituting 15.1 per cent of project expenditures.

7. Table 5 shows 1996 expenditures by executing agency and by major expenditure component of the project budgets. It indicates that the major components of UNFPA projects consist of personnel services, 27 per cent, and equipment and supplies, 26 per cent (1995: 23 per cent and 34 per cent, respectively).

8. Table 6 provides a breakdown of costs, by executing agency, of technical support services (TSS) and administrative and operational services (AOS) for 1996, which totalled $31.1 million (1995: $30.9 million), or 10.4 per cent of total expenditure. TSS costs amounted to $23.5 million; AOS, $7.6 million.[1]

9. Table 7 shows total project expenditures by country for 1995 and 1996.

10. Programme expenditures, including TSS and AOS, in 1996 ($247.5 million) constituted 82.4 per cent of total expenditure (1995: $261.9 million, or 83.9 per cent of total expenditures).

E. Administrative and programme support services (APSS) expenditures

11. The total net APSS expenditure in 1996 amounted to $52.8 million (1995: $50.1 million). Of this amount, headquarters net administrative costs totalled $13.3 million (4.4 per cent of total expenditures), after the application of income credits totalling $5.3 million.[2] Programme support costs, including total country office costs, amounted to $39.5 million, $27.6 million (1995: $25.3 million) of which was incurred by country offices, and the remainder ($11.9 million) at

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[1] Total AOS costs comprise three elements: (a) reimbursements to United Nations executing agencies for support costs - $1.6 million; (b) payment of overhead charges to non-governmental organizations (NGOs) executing UNFPA-financed projects - $1.1 million; and (c) reimbursements to UNFPA for support costs ($3.3 million) and procurement services ($1.5 million) provided to government-executed projects - $4.8 million.

[2] These income credits are in respect of income earned by UNFPA for support costs ($3.3 million) and for procurement services ($1.5 million) provided to government-executed projects, and for projects executed under trust fund arrangements ($0.5 million).

headquarters.[3] Tables 12 and 13 show the historical distribution between headquarters and country offices, and between administrative and programme support costs, respectively. The net APSS expenditure in 1996 shows a slight increase in comparison to 1995 when measured as a percentage of total income or expenditure. An analysis of the 1996 expenditure by component is contained in table 8.

F. Status of reserves

12. Operational reserve. At its thirty-eighth session, the Governing Council decided (in decision 91/36) that the level of the operational reserve should be set at 20 per cent of regular resources income for each year of the UNFPA work plan and that the level of the reserve would be reviewed every other year. In accordance with this decision, the operational reserve was increased from $53 million to $63 million in 1996. In December, as a result of the late receipt of contributions from a major donor, UNFPA had to draw down from the operational reserve to finance on-going activities. The unencumbered balance of the operational reserve was approximately $43.1 million as at 31 December 1996. In January, the operational reserve was fully restored to its $63 million level.

13. Field office accommodation reserve. A reserve for field office accommodation amounting to $5 million was approved by the Governing Council for 1992-1993 (decision 91/36, para. 17). An amount of $1 million was utilized in 1994 towards the cost of construction of common premises for organizations of the United Nations in Cape Verde, Guinea-Bissau, Maldives and Sao Tome and Principe. No further payments were made, pending completion of the on-going UNDP review of its Reserve for Field Accommodation.

G. Liquidity position

14. As at 31 December 1996, UNFPA held cash and investments amounting to $106.0 million, which included $47.1 million in investments of the reserves (1995: $67.0 million) and $58.7 million in investments for trust funds (1995: $48.7 million) (table 2). As stated in paragraph 12 above, and in accordance with UNFPA Financial Regulation 12.2, UNFPA was required to utilize the operational reserve to finance on-going activities pending receipt of contributions pledged for 1996.

H. UNFPA trust funds

15. Table 9 shows that in 1996 total income from donors and other sources for projects financed by trust funds, including those funded through multi-bilateral sources, and from procurement

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[3] The APSS budget consists of four programmes. Administrative costs include programmes I (executive direction and management) and II (administration, information and external relations services and programme coordination). Programme support costs that are exclusively devoted to programme development and implementation include programme III (programme planning, appraisal and monitoring) and programme IV (which consists of UNFPA's country offices). For future biennia starting with 1998-1999, the budget will follow the format and guidelines approved by the Executive Board in decision 97/6 on the harmonization of the budgets of UNDP, UNICEF and UNFPA.

services was $49.3 million (1995: $33.1 million). Total expenditures from trust funds were $33.1 million (1995: $33.3 million).

16. As at 1 January 1996, the unexpended balance of the trust funds was $23.7 million, which, when added to total income of $49.3 million received in 1996, resulted in a total amount available for programming of $73.0 million. The unexpended balance as at 31 December 1996 of $39.9 million is available to finance trust fund activities in 1997. Table 10 shows programme expenditures from trust funds by country for 1995 and 1996. These figures include project costs and support costs paid by trust funds.

ANNEX

Table 1. Statement of income and expenditures for the twelve months ended 31 December 1996
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Figure 4. Project expenditure by United Nations agency (1995 and 1996)
Figure 5. Project expenditure by budget component (1995 and 1996)
Figure 6. Project expenditure by region (1995 and 1996)

Table 1

Statement of income and expenditure for the twelve months ended 31 December 1996
(Millions of US dollars)

	1995	1996	Per cent change
Income			
Contributions from Governments and other contributors			
Pledges for current period	302.8	302.6	-0%
Interest income	7.6	5.1	-33%
Miscellaneous income (net)	2.2	1.0	-52%
Total Income	**312.6**	**308.8**	**-1%**
Expenditure			
Programme expenditure			
United Nations agencies	37.0	27.2	-26%
Governments	50.6	65.4	29%
UNFPA	108.6	91.1	-16%
NGOs	34.7	32.7	-6%
Subtotal - Project expenditure	230.9	216.5	-6%
Technical support costs	22.8	23.5	3%
Administrative and operational services	8.1	7.6	-7%
Subtotal - Other programme costs	31.0	31.1	0%
Total programme expenditure	261.9	247.5	-5%
Administrative expenditure			
Administrative costs (net)	12.6	13.3	5%
Programme support services	37.6	39.5	5%
Total administrative expenditure	50.2	52.8	5%
Total expenditure	**312.1**	**300.3**	**-4%**
Surplus income/(expenditure)	**0.5**	**8.5**	**1,619%**

Statement of movement of resources		
Balance as at 1 January	33.1	23.7
Surplus income/(expenditure)	0.5	8.5
Transfer to operational reserve	(10.0)	0.0
Transfer to trust funds - GCCP *	0.0	(5.0)
Total unspent resources as at 31 December	23.7	27.2

Note: Figures may not add up to totals given due to rounding.

* Global Contraceptive Commodity Programme

Table 2

Statement of assets and liabilities as at 31 December 1996
(Millions of US dollars)

	1995	1996
Assets		
Cash	2.1	0.2
Investments		
General resources	71.6	0.0
Cost-sharing	0.2	0.0
Trust funds	48.7	58.7
Investments of the reserve for field accommodation	4.0	4.0
Investments of the operational reserve	63.0	43.1
Total cash and investments	189.5	106.0
Advances and accounts receivable		
Non-convertible currencies	0.0	0.0
Operating funds provided to		
Executing agencies	1.7	5.0
Governments	14.4	9.0
NGOs	6.0	7.0
Accounts receivable and deferred charges	1.2	0.5
Accrued interest	2.8	1.4
Subtotal - Advances and accounts receivable	26.1	23.0
Pledges receivable from Governments	0.6	70.9
Assets held in reserve for field accommodation	1.0	1.0
Total assets	**217.2**	**200.9**
Liabilities, reserves and unexpended resources		
Liabilities		
Accounts payable	2.1	7.5
Operating funds payable to executing agencies	5.7	5.3
Unliquidated obligations of executing agencies	81.1	51.6
Due to UNFPA trust funds	23.7	39.9
Due to Junior Professional Officers programme	0.2	0.1
Due to UNDP	12.8	1.3
Subtotal - Liabilities	125.6	105.8
Reserves		
Reserve for field accommodation	5.0	5.0
Operational reserve	63.0	63.0
Subtotal - Reserves	68.0	68.0
Unexpended resources		
Cost-sharing	0.2	0.0
General resources	23.5	27.1
Subtotal - Unexpended resources	23.7	27.2
Total liabilities, reserves and unexpended resources	**217.2**	**200.9**

Note: Figures may not add up to totals given due to rounding.

Table 3a

Summary of pledges by donor Governments as at 31 December 1996

		1995		1996		
		Pledges		Pledges		Pledges
		National Currency	$US	National Currency	$US	Perct. Change a_/
Major Donors b_/						
Australia	(A$)	2,680,000	1,956,204	3,000,000	2,222,222	12%
Belgium	(BF)	65,000,000	2,296,820	77,100,000	2,519,608	19%
Canada	(C$)	9,470,000	7,015,200	9,470,000	7,016,355	0%
Denmark	(Dkr)	150,000,000	27,601,186	213,000,000	36,410,256	42%
		47,000,000 c_/	8,468,469	62,000,000 c_/	10,598,291	
Finland	(MK)	50,000,000	11,668,611	59,000,000	12,841,547	18%
				5,000,000 c_/	1,079,144	
Germany	(DM)	46,200,000	32,589,658	46,200,000	30,753,100	0%
Italy	(L)	2,000,000,000	1,250,000	2,500,000,000	1,661,130	25%
Japan	(Yen)	0	51,800,000	0	54,420,000	5%
Netherlands	(Fls)	57,000,000	35,862,337	75,000,000	44,796,528	32%
		4,700,000 c_/	2,958,394			
Norway	(Nkr)	183,000,000	29,131,239	183,000,000	28,304,184	0%
Sweden	(Skr)	116,000,000	16,500,711	116,000,000	17,458,690	0%
		70,000,000 f_/	9,421,265			
Switzerland	(SWF)	8,900,000	7,177,419	9,000,000	6,976,744	1%
United Kingdom	(£)	7,500,000	11,721,612	10,500,000	16,495,809	40%
		1,900,000 c_/	3,015,873			
		100,000 c_/	1,587,302			
United States	(US$)	0	35,000,000	0	22,750,000	-35%
Subtotal			297,022,300		296,303,608	
Other Donors d_/						
Austria	(S)	0	696,000	0	635,000	-9%
China	(YRMB)	0	820,000	0	400,000	-51%
France	(FF)	3,200,000	653,061	4,000,000	782,779	25%
India	(Rs)	9,000,000	259,366	9,000,000	253,521	0%
Indonesia	(RP)	0	167,687	0	171,423	2%
Ireland	(L)	250,000	409,050	250,000	389,575	0%
Luxembourg	(LuxF)	6,000,000	209,041	8,000,000	254,737	33%
New Zealand	(NZ$)	600,000	378,000	1,000,000	672,200	67%
Pakistan	(Rs)	0	500,000	0	500,000	0%
Republic of Korea	(W)	0	300,000	0	500,000	67%
Russian Federation	(R)	0	105,000	0	150,000	43%
Spain	(PTS)	60,000,000	490,685	60,000,000	475,063	0%
Subtotal			4,987,890		5,184,298	
Remaining Donors e_/			757,436		1,000,638	
Total			302,767,626		302,488,544	
Adjustments for prior periods (net)					107,147	
Grand Total Pledges			**302,767,626**		**302,595,691**	

a_/ All percentage changes are based on the currency of the pledge.
b_/ Major donors as defined here comprise Governments that have pledged the equivalent of US$ 1 million or more.
c_/ Supplementary contribution.
d_/ Other donors include 12 countries each year, in 1995 and 1996, contributing pledges of US$ 100,000 and over.
e_/ Remaining donors include 59 in 1995 and 69 in 1996.
f_/ Additional pledge for 1994 received in 1995.

Table 3b
Status of voluntary contributions pledged as at 31 December 1996
(United States dollars)

Donor	Balance due as at 1 January 1996 for prior years	Additions and adjustments for prior years	Pledges for 1996	Pledges for 1997 and future years: Local Currency	Pledges for 1997 and future years: United States dollars	Total	Total payments a/ received in 1996	Unpaid pledges as at 31 December 1996	Composition of Balance Due: For 1996 and prior years	Composition of Balance Due: For 1997 and future years
Afghanistan	10,920	(10,920)	-	-	-	-	-	-	-	-
Albania	579	(45)	-	-	-	534	-	534	534	-
Algeria	12,220	(1,350)	5,435	300,000	5,435	21,740	-	21,740	16,305	5,435
Antigua and Barbuda	500	-	1,000	-	-	1,500	1,500	0	-	-
Argentina	-	-	20,000	-	-	20,000	20,000	0	-	-
Australia	-	-	2,222,222	-	-	2,222,222	2,222,222	0	-	-
Austria	-	-	635,000	6,800,000	629,630	1,264,630	635,000	629,630	-	629,630
Bahamas	500	-	-	-	-	500	-	500	500	-
Bangladesh	-	-	25,000	-	25,000	50,000	25,000	25,000	-	25,000
Barbados	-	-	3,500	-	-	3,500	3,500	0	-	-
Belgium	-	-	2,519,608	95,000,000	3,006,329	5,525,937	2,519,608	3,006,329	-	3,006,329
Benin	7,000	-	2,500	-	2,500	12,000	-	12,000	9,500	2,500
Bhutan	2,800	-	2,800	-	2,800	8,400	5,600	2,800	-	2,800
Bolivia	4,000	-	-	-	-	4,000	-	4,000	4,000	-
Brazil	15,000	-	15,000	-	-	30,000	-	30,000	30,000	-
British Virgin Islands	-	505	-	-	-	505	505	0	-	-
Bulgaria	1,628	(1,271)	110	75,000	150	617	247	370	220	150
Burkina Faso	14,229	(636)	-	-	-	13,593	-	13,593	13,593	-
Canada	-	-	7,016,355	-	-	7,016,355	7,016,355	0	-	-
Central African Republic	1,423	(64)	-	-	-	1,359	-	1,359	1,359	-
Chile	10,000	-	6,000	-	5,000	21,000	15,000	6,000	1,000	5,000
China	-	-	400,000	-	-	400,000	400,000	0	-	-
Colombia	-	-	40,000	-	40,000	80,000	40,071	39,929	-	39,929
Comoros	1,897	(84)	-	-	-	1,813	-	1,813	1,813	-
Congo	-	-	4,008	-	-	4,008	4,008	0	-	-
Cote d'Ivoire	4,065	(181)	-	-	-	3,884	-	3,884	3,884	-
Cyprus	-	-	-	500	1,075	1,075	-	1,075	-	1,075
Czech Republic	-	-	74,349	2,000,000	74,349	148,698	-	148,698	74,349	74,349
Democratic People's Republic of Korea	-	-	9,662	-	-	9,662	9,662	0	-	-
Denmark	-	-	47,008,547	-	-	47,008,547	47,008,547	0	-	-
Djibouti	-	-	1,000	-	1,000	2,000	-	2,000	1,000	1,000
Dominican Republic	7,519	(56)	-	-	-	7,463	-	7,463	7,463	-
Egypt	166,140	-	88,922	350,000	103,858	358,920	-	358,920	255,062	103,858
Equatorial Guinea	3,455	(154)	-	-	-	3,301	-	3,301	3,301	-
Ethiopia	-	-	4,747	30,000	4,747	9,494	4,747	4,747	-	4,747
Federated States of Micronesia	2,000	-	3,000	-	-	5,000	2,000	3,000	3,000	-
Fiji	-	-	3,581	5,000	3,597	7,178	3,581	3,597	-	-
Finland	-	-	13,920,691	-	-	13,920,691	13,920,691	0	-	-
France	-	-	782,779	-	-	782,779	782,779	0	-	-
Gabon	-	-	79,681	-	-	79,681	79,681	0	-	-
Gambia	5,000	-	-	-	-	5,000	-	5,000	5,000	-
Germany	-	-	30,753,100	-	-	30,753,100	30,753,100	0	-	-
Ghana	5,000	-	5,000	-	5,000	15,000	10,000	5,000	-	5,000
Guatemala	1,528	-	-	-	-	1,528	-	1,528	1,528	-
Haiti	-	-	2,000	-	-	2,000	2,000	0	-	-
Honduras	-	-	4,897	-	-	4,897	4,897	0	-	-
Iceland	3,063	(97)	-	50,000	744	3,710	2,966	744	-	744
India	-	-	253,521	9,000,000	253,521	507,042	253,521	253,521	-	253,521

Table 3b (continued)
Status of voluntary contributions pledged as at 31 December 1996
(United States dollars)

Donor	Balance due as at 1 January 1996 for prior years	Additions and adjustments for prior years	Pledges for 1996	Pledges for 1997 and future years: Local Currency	Pledges for 1997 and future years: United States dollars	Total	Total payments a/ received in 1996	Unpaid pledges as at 31 December 1996	Composition of Balance Due: For 1996 and prior years	Composition of Balance Due: For 1997 and future years
Indonesia	-	-	171,423	-	170,000	341,423	171,423	170,000	-	170,000
Iran, Islamic Republic	50,000	-	-	-	-	50,000	-	50,000	50,000	-
Ireland	-	-	389,575	-	-	389,575	389,575	0	-	-
Israel	-	1,989	3,000	-	4,000	8,989	8,989	0	-	-
Italy	-	-	1,661,130	-	-	1,661,130	1,328,904	332,226	332,226	-
Jamaica	-	-	419	-	-	419	419	0	-	-
Japan	-	-	54,420,000	-	-	54,420,000	-	54,420,000	54,420,000	-
Jordan	-	-	48,023	-	-	48,023	48,023	0	-	-
Kenya	2,998	(53)	-	-	-	2,945	-	2,945	2,945	-
Kuwait	5,000	-	5,000	-	-	10,000	5,000	5,000	5,000	-
Lao People's Democratic Republic	-	-	1,000	-	1,000	2,000	1,000	1,000	-	1,000
Lebanon	-	-	11,000	-	3,000	14,000	5,000	9,000	6,000	3,000
Lesotho	-	-	949	4,696	1,025	1,974	949	1,025	-	1,025
Libyan Arab Jamahiriya	-	-	-	-	10,000	10,000	-	10,000	-	10,000
Luxembourg	-	-	254,737	10,000,000	316,456	571,193	254,737	316,456	-	316,456
Madagascar	15,000	-	-	-	-	15,000	504	14,496	14,496	-
Malawi	918	-	2,614	98,625	6,488	10,020	-	10,020	3,532	6,488
Malaysia	-	-	15,000	-	-	15,000	15,000	0	-	-
Maldives	-	-	2,000	-	2,000	4,000	2,000	2,000	-	2,000
Malta	-	-	1,200	-	-	1,200	1,200	0	-	-
Marshall Islands	-	-	-	-	1,000	1,000	1,000	0	-	-
Mauritania	7,576	(224)	-	500,000	3,676	11,028	-	11,028	7,352	3,676
Mauritius	-	-	5,556	-	-	5,556	5,556	0	-	-
Mexico	-	40,000	-	-	-	40,000	40,000	0	-	-
Mongolia	-	-	4,000	-	4,000	8,000	4,000	4,000	-	4,000
Morocco	-	-	6,000	-	8,000	14,000	-	14,000	6,000	8,000
Mozambique	2,481	214	-	-	-	2,695	238	2,457	2,457	-
Myanmar	-	-	10,204	-	5,000	15,204	10,204	5,000	-	5,000
Namibia	549	(112)	-	-	500	937	-	937	437	500
Nepal	6,000	-	6,000	-	-	12,000	6,000	6,000	6,000	-
Netherlands	-	-	44,796,528	77,000,000	44,767,442	89,563,970	44,796,528	44,767,442	-	44,767,442
New Zealand	-	-	672,200	1,200,000	851,064	1,523,264	672,200	851,064	-	851,064
Nigeria	3,019	146	-	-	-	3,165	-	3,165	3,165	-
Niue	-	-	1,064	-	-	1,064	1,064	0	-	-
Norway	-	-	28,304,184	-	-	28,304,184	28,304,184	0	-	-
Pakistan	-	-	502,874	-	500,000	1,002,874	502,874	500,000	-	500,000
Palau	-	-	500	-	-	500	500	0	-	-
Panama	-	-	8,450	-	-	8,450	8,450	0	-	-
Papua New Guinea	-	-	4,511	-	-	4,511	4,511	0	-	-
Paraguay	-	-	27,000	-	27,000	54,000	27,000	27,000	-	27,000
Peru	15,000	-	-	-	10,000	25,000	15,000	10,000	-	10,000
Philippines	57,915	-	76,336	-	-	134,251	57,915	76,336	76,336	-
Poland	-	-	23,985	-	-	23,985	23,985	0	-	-
Portugal	-	-	25,000	-	40,000	65,000	25,000	40,000	-	40,000
Republic of Korea	-	-	500,000	-	525,000	1,025,000	500,000	525,000	-	525,000

Table 3b (continued)
Status of voluntary contributions pledged as at 31 December 1996
(United States dollars)

Donor	Balance due as at 1 January 1996 for prior years	Additions and adjustments for prior years	Pledges for 1996	Pledges for 1997 and future years: Local Currency	Pledges for 1997 and future years: United States dollars	Total	Total payments a/ received in 1996	Unpaid pledges as at 31 December 1996	Composition of Balance Due: For 1996 and prior years	Composition of Balance Due: For 1997 and future years
Romania	-	-	1,378	5,184,375	1,477	2,855	1,378	1,477	-	1,477
Russian Federation	-	-	150,000	-	150,000	300,000	150,000	150,000	-	150,000
Saint Lucia	-	-	720	-	-	720	720	0	-	-
Samoa	5,000	-	5,000	-	5,000	15,000	15,000	0	-	-
Sao Tome and Principe	-	-	1,327	-	-	1,327	1,327	0	-	-
Saudia Arabia	-	-	30,000	-	30,000	60,000	-	60,000	30,000	30,000
Senegal	-	7,602	7,602	-	-	15,204	15,204	0	-	-
Seychelles	-	-	-	-	100	100	-	100	-	100
Sierra Leone	-	-	2,222	-	-	2,222	2,222	0	-	-
Slovenia	-	-	671	150,000	1,087	1,758	671	1,087	-	1,087
South Africa	-	-	10,000	-	-	10,000	10,000	0	-	-
Spain	-	-	475,063	-	-	475,063	475,063	0	-	-
Sri Lanka	-	-	10,000	-	-	10,000	10,000	0	-	-
Sudan	-	-	1,000	-	-	1,000	-	1,000	1,000	-
Swaziland	549	(112)	-	-	-	437	-	437	437	-
Sweden	-	-	17,458,690	116,000,000	17,313,433	34,772,123	17,458,690	17,313,433	-	17,313,433
Switzerland	-	-	6,976,744	9,000,000	6,976,744	13,953,488	6,976,744	6,976,744	-	6,976,744
Syrian Arab Republic	-	-	1,930	-	-	1,930	1,930	0	-	-
Thailand	-	-	84,000	-	95,630	179,630	179,630	0	-	-
Togo	6,098	(273)	-	-	-	5,825	-	5,825	5,825	-
Tunisia	-	32,467	25,853	-	-	58,320	32,467	25,853	25,853	-
Turkey	120,000	-	90,000	-	90,000	300,000	-	300,000	210,000	90,000
Tuvalu	2,632	40	-	-	-	2,672	2,672	0	-	-
Uganda	4,238	(79)	1,132	-	-	5,291	-	5,291	5,291	-
United Kingdom	-	-	16,495,809	-	-	16,495,809	16,495,809	0	-	-
United Republic of Tanzania	9,950	360	-	-	-	10,310	-	10,310	10,310	-
United States of America	-	-	22,750,000	-	-	22,750,000	7,585,000	15,165,000	15,165,000	-
Uruguay	25,920	34,560	25,000	-	-	85,480	-	85,480	85,480	-
Vanuatu	-	5,000	-	-	5,000	10,000	5,000	5,000	-	5,000
Venezuela	6,118	-	-	-	-	6,118	-	6,118	6,118	-
Viet Nam	-	-	3,400	-	3,436	6,836	-	6,836	3,400	3,436
Yemen	1,991	-	2,847	-	-	4,838	-	4,838	4,838	-
Zambia	-	-	2,000	-	-	2,000	-	2,000	2,000	-
Zimbabwe	219	(25)	680	-	-	874	-	874	874	-
TOTAL	629,637	107,147	302,488,545		76,093,293	379,318,622	232,405,247	146,913,375	70,925,783	75,987,592

a/ Includes payments received for 1997

Colombia	71
Israel	4,000
Marshall Islands	1,000
Western Samoa	5,000
Thailand	95,630
TOTAL	105,701

Table 4

Project expenditure by executing agency (1995 and 1996)
(Millions of US dollars)

Executing Agency	1995		1996	
	$	Percentage of total expenditure	$	Percentage of total expenditure
United Nations	6.19	2.68%	6.22	2.87%
UN-OPS	0.58	0.25%	0.02	0.01%
ECA	0.09	0.04%	0.04	0.02%
ECE	0.87	0.38%	0.62	0.28%
ECLAC	1.38	0.60%	0.77	0.36%
ESCAP	1.19	0.51%	0.95	0.44%
ESCWA	0.06	0.03%	0.13	0.06%
FAO	2.69	1.16%	1.12	0.52%
ILO	4.47	1.93%	3.13	1.45%
UNIDO	0.12	0.05%	0.11	0.05%
UNESCO	4.74	2.05%	3.92	1.81%
UNICEF	1.41	0.61%	0.19	0.09%
UNRWA	0.30	0.13%	0.00	0.00%
WHO	12.88	5.58%	10.00	4.62%
Subtotal	36.97	16.01%	27.21	12.57%
Governments a_/	50.58	21.90%	65.41	30.22%
NGOs b_/	34.74	15.05%	32.73	15.12%
UNFPA c_/	108.62	47.04%	91.10	42.09%
TOTAL	230.91	100.00%	216.45	100.00%

Note: Figures may not add up to totals given due to rounding.

a_/ Government-executed project expenditure does not include $13.9 million of cash advances in 1995 and $8.5 million of cash advances in 1996, which were reported as accounts receivable in the operating fund accounts with Governments at the year-end.

b_/ NGO-executed project expenditure does not include $5.8 million of cash advances in 1995 and $6.8 million of cash advances in 1996, which were reported as accounts receivable in the operating fund accounts with NGOs at the year-end.

c_/ Includes UNFPA procurement assistance in respect of Government-executed projects amounting to $46.4 million in 1995 and $31.5 million in 1996.

Table 5

Project expenditure by executing agency and by major component, 1996
(Thousands of US dollars)

Executing Agency	Personnel services	Sub-contracts	Training (fellowships)	Equipment and supplies	Miscellaneous	Total project expenditure
UNITED NATIONS	4,662	122	775	181	477	6,217
UN-OPS	(19)	12	12	9	4	19
ECA	31	0	6	(0)	2	38
ECE	537	24	50	2	1	615
ECLAC	632	11	108	2	17	771
ESCAP	686	89	87	17	71	949
ESCWA	65	2	59	0	5	130
FAO	480	160	322	24	130	1,116
ILO	1,991	63	587	209	279	3,129
UNESCO	1,642	339	1,311	272	358	3,922
UNICEF	5	0	0	187	(4)	188
UNIDO	65	0	41	1	8	115
UNRWA	0	0	0	0	0	0
WHO	2,833	4,009	1,935	897	328	10,003
UN agencies total	13,610	4,832	5,292	1,801	1,676	27,212
Governments	11,339	12,842	22,083	11,486	7,658	65,409
NGOs	10,598	9,525	7,265	2,647	2,699	32,734
UNFPA	21,875	14,577	11,837	39,368	3,440	91,098 a_/
Total	57,422	41,777	46,477	55,302	15,473	216,452
Per cent of total	27%	19%	21%	26%	7%	100%

Note: Figures may not add up to totals given due to rounding.

a_/ Includes UNFPA procurement assistance in respect of government-executed projects amounting to $31.5 million.

Table 6

Technical support services and administrative and operational services costs, 1996
(Thousands of US dollars)

Executing Agency	Technical support services	Administrative and operational services	Total
United Nations	1,707	412	2,119
UN-OPS	0	1	1
ECA	1,747	0	1,747
ECE	0	37	37
ECLAC	97	58	155
ESCAP	807	37	844
ESCWA	438	0	438
FAO	1,700	55	1,755
ILO	3,391	223	3,614
UNESCO	2,684	274	2,958
UNICEF	0	11	11
UNIDO	0	7	7
UNRWA	0	0	0
WHO	2,961	484	3,445
UN agencies total	15,532	1,599	17,131
Governments	0	3,270	3,270
NGOs	139	1,133	1,272
UNFPA	7,844	1,576	9,420
Total	23,515	7,578	31,093

Note: Figures may not add up to totals given due to rounding.

Table 7

Project expenditures by country for 1995 and 1996
(Thousands of US dollars)

Country	Category *	1995	1996	Per cent change
Africa region (sub-Saharan)				
Angola	A	749.5	1,199.2	60%
Benin	A	806.9	942.9	17%
Burkina Faso	A	2,170.6	2,387.3	10%
Burundi	A	1,329.7	1,284.9	-3%
Cameroon	A	1,005.8	1,272.8	27%
Cape Verde	A	1,168.5	273.9	-77%
Central African Republic	A	1,002.7	1,015.7	1%
Chad	A	1,041.5	1,304.9	25%
Comoros	A	571.3	1,137.2	99%
Congo	A	515.0	1,054.6	105%
Cote d'Ivoire	A	1,401.1	1,528.6	9%
Equatorial Guinea	A	1,080.4	1,017.6	-6%
Eritrea	A	412.4	1,046.4	154%
Ethiopia	A	4,885.0	3,069.5	-37%
Gambia	A	635.4	351.8	-45%
Ghana	A	2,334.1	720.4	-69%
Guinea	A	1,404.7	2,433.5	73%
Guinea-Bissau	A	598.5	505.8	-15%
Kenya	A	3,555.7	3,056.7	-14%
Lesotho	A	561.1	680.8	21%
Liberia	A	138.1	144.2	4%
Madagascar	A	1,930.1	1,802.1	-7%
Malawi	A	2,624.0	3,208.1	22%
Mali	A	1,816.7	1,786.1	-2%
Mauritania	A	952.4	522.2	-45%
Mozambique	A	1,834.9	1,605.3	-13%
Niger	A	1,030.5	1,655.2	61%
Nigeria	A	4,908.0	2,724.9	-44%
Rwanda	A	658.6	730.5	15%
Sao Tome and Principe	A	383.9	267.7	-30%
Senegal	A	2,814.3	3,476.5	24%
Sierra Leone	A	466.6	479.9	3%
Togo	A	1,134.3	968.7	-15%
Uganda	A	4,618.3	2,854.5	-38%
United Republic of Tanzania	A	4,440.2	4,011.7	-10%
Zaire a_/	A	75.7	643.7	750%
Zambia	A	718.0	1,726.7	140%
Subtotal category A		57,774.6	54,892.8	-5%
Botswana	B	948.9	742.9	-22%
Gabon	B	515.5	465.8	-10%
Namibia	B	1,557.4	1,870.0	20%
South Africa	B	644.2	1,103.3	71%
Swaziland	B	883.2	471.1	-47%
Zimbabwe	B	2,599.0	1,316.3	-49%
Subtotal category B		7,148.2	5,969.3	-16%
Mauritius	C	448.2	282.7	-37%
Seychelles	O	166.5	274.4	65%
Country projects total		65,537.5	61,419.2	-6%
Regional projects total		7,615.2	4,304.6	-43%
Africa (sub-Saharan) regional total		73,152.8	65,723.7	-10%

a_/ The Democratic Republic of the Congo as of 17 May 1997.

Table 7 (continued)

Project expenditures by country for 1995 and 1996
(Thousands of US dollars)

Country	Category *	1995	1996	Per cent change
Asia and the Pacific				
Afghanistan	A	7.8	4.9	-38%
Bangladesh	A	8,332.1	7,985.1	-4%
Bhutan	A	771.7	674.5	-13%
Cambodia	A	1,365.5	2,284.3	67%
India	A	11,869.7	13,265.2	12%
Kiribati	A	111.1	58.0	-48%
Lao People's Democratic Republic	A	744.9	1,061.4	42%
Maldives	A	213.8	582.1	172%
Mongolia	A	1,244.5	855.7	-31%
Myanmar	A	199.8	1,026.5	414%
Nepal	A	3,784.4	6,189.4	64%
Pakistan	A	4,593.6	6,381.9	39%
Samoa	A	132.8	96.3	-27%
Solomon Islands	A	277.9	263.1	-5%
Tuvalu	A	76.2	(15.6)	-120%
Vanuatu	A	269.3	78.9	-71%
Subtotal category A		33,995.0	40,791.6	20%
Fed. States of Micronesia	B	162.5	175.8	8%
Indonesia	B	850.9	2,864.6	237%
Iran (Islamic Republic of)	B	3,050.3	2,280.8	-25%
Malaysia	B	292.0	372.5	28%
Papua New Guinea	B	554.9	971.8	75%
Philippines	B	7,265.5	7,634.6	5%
Viet Nam	B	6,855.6	4,503.4	-34%
Subtotal category B		19,031.7	18,803.5	-1%
China	C	7,751.3	(2.9)	-100%
Democr. People's Rep. of Korea	C	850.3	783.4	-8%
Fiji	C	394.6	387.0	-2%
Sri Lanka	C	1,007.6	1,701.8	69%
Thailand	C	569.6	1,815.6	219%
Subtotal category C		10,573.9	4,685.0	-56%
Azerbaijan	T	57.4	429.3	648%
Central Asian countries	T	0.0	310.0	
Kazakstan	T	231.7	1,370.8	492%
Kyrgyzstan	T	561.4	1,049.7	87%
Tajikistan	T	193.1	261.0	35%
Turkmenistan	T	259.2	139.4	-46%
Uzbekistan	T	106.4	625.5	488%
Subtotal countries w. economies in transition		1,409.2	4,185.7	197%
Cook Islands	O	191.5	107.4	-44%
Marshall Islands	O	333.2	161.8	-51%
Niue	O	15.1	9.1	-39%
Pacific Multi-Islands	O	745.2	1,010.7	36%
Palau	O	117.4	182.6	56%
Republic of Korea	O	0.0	7.2	
Tokelau	O	3.1	12.4	297%
Tonga	O	137.9	174.5	27%
Subtotal other countries		1,285.0	1,289.1	0%
Country and territory projects total		66,553.2	69,754.8	5%
Regional projects total		5,275.6	4,320.0	-18%
Asia and the Pacific regional total		71,828.8	74,074.8	3%

Table 7 (continued)

Project expenditures by country for 1995 and 1996
(Thousands of US dollars)

Country	Category *	1995	1996	Per cent change
Arab States				
Djibouti	A	241.3	233.2	-3%
Egypt	A	2,696.6	2,624.9	-3%
Somalia	A	411.0	36.9	-91%
Sudan	A	2,469.7	3,092.6	25%
Yemen	A	2,085.3	3,225.8	55%
Subtotal category A		7,903.9	9,213.4	17%
Algeria	B	1,191.2	1,346.4	13%
Iraq	B	845.0	(33.9)	-104%
Jordan	B	778.7	1,115.7	43%
Lebanon	B	998.4	1,006.0	1%
Morocco	B	4,499.3	3,573.1	-21%
Syrian Arab Republic	B	3,218.6	1,504.9	-53%
Tunisia	B	1,980.6	2,349.0	19%
Subtotal category B		13,511.8	10,861.2	-20%
Libyan Arab Jamahiriya	O	8.9	13.2	49%
Oman	O	0.5	4.4	798%
Occupied Palestinian Territories	O	65.4	738.0	1029%
Subtotal other countries		74.8	755.6	911%
Country projects total		21,490.5	20,830.2	-3%
Regional projects total		1,164.7	752.1	-35%
Arab States regional total		22,655.2	21,582.3	-5%
Europe				
Turkey	B	742.5	722.9	-3%
Albania	T	585.7	391.8	-33%
Armenia	T	26.3	489.1	1762%
Belarus	T	0.0	13.6	
Bosnia and Herzegovina	T	0.0	394.2	
Bulgaria	T	26.2	5.5	-79%
Croatia	T	135.8	106.5	-22%
Estonia	T	47.5	0.9	-98%
Georgia	T	46.6	9.6	-79%
Latvia	T	82.1	24.8	-70%
Lithuania	T	62.6	18.0	-71%
Moldova, Republic of	T	312.5	98.2	-69%
Poland	T	187.8	142.4	-24%
Romania	T	192.4	370.1	92%
Russian Federation	T	26.2	430.9	1548%
Ukraine	T	0.0	5.4	
Subtotal countries with economies in transition		1,731.8	2,501.0	44%
Cyprus	O	21.7	0.0	-100%
Portugal	O	1.4	0.0	-100%
Subtotal other countries		23.0	0.0	-100%
Country projects total		2,497.3	3,223.9	29%
Regional projects total		1,250.3	1,209.7	-3%
Europe regional total		3,747.6	4,433.6	18%
Arab States and Europe grand total		26,402.8	26,015.9	-1%

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Table 7 (continued)

Project expenditures by country for 1995 and 1996
(Thousands of US dollars)

Country	Category *	1995	1996	Per cent change
Latin America and the Caribbean				
Haiti	A	2,224.4	2,178.8	-2%
Nicaragua	A	1,763.1	2,028.9	15%
Subtotal category A		3,987.5	4,207.7	6%
Belize	B	28.9	55.8	93%
Bolivia	B	2,485.6	1,898.2	-24%
Brazil	B	2,275.5	1,797.6	-21%
Colombia	B	632.5	625.3	-1%
Dominican Republic	B	1,753.8	1,197.3	-32%
Ecuador	B	2,022.2	1,042.9	-48%
El Salvador	B	886.6	612.2	-31%
Guatemala	B	783.3	392.3	-50%
Guyana	B	138.2	176.8	28%
Honduras	B	1,371.9	1,399.6	2%
Jamaica	B	234.0	464.6	99%
Mexico	B	3,288.8	1,720.3	-48%
Paraguay	B	1,280.4	628.6	-51%
Peru	B	2,391.2	2,413.9	1%
Saint Lucia	B	55.9	24.8	-56%
Saint Vincent and the Grenadines	B	54.2	8.6	-84%
Trinidad and Tobago	B	0.3	0.1	-68%
Venezuela	B	504.3	372.6	-26%
Subtotal category B		20,187.6	14,831.5	-27%
Chile	C	374.0	387.7	4%
Costa Rica	C	327.2	246.7	-25%
Cuba	C	1,576.4	1,839.4	17%
Panama	C	319.4	289.1	-9%
Suriname	C	131.8	54.1	-59%
Uruguay	C	97.3	274.4	182%
Subtotal category C		2,825.9	3,091.4	9%
Argentina	O	197.8	212.1	7%
Antigua and Barbuda	O	22.4	9.7	-57%
Barbados	O	20.8	4.2	-79%
Caribbean	O	883.0	538.2	-39%
Dominica	O	67.5	83.5	24%
Grenada	O	70.6	50.8	-28%
Montserrat	O	0.0	0.0	
Turks and Caicos Islands	O	0.0	3.1	
Subtotal other countries		1,261.7	901.8	-29%
Country projects total		28,262.6	23,032.4	-19%
Regional projects total		3,919.4	3,070.5	-22%
Latin America and the Caribbean regional total		32,182.0	26,103.0	-19%
Interregional		27,390.0	24,155.7	-12%
Regional projects		19,225.2	13,656.9	-29%
Category A		103,661.0	109,105.4	5%
Category B		60,621.9	51,188.4	-16%
Category C		13,848.0	8,059.1	-42%
Countries with economies in transition		3,141.0	6,686.7	113%
Other countries		2,810.9	3,220.8	15%
Grand total		**230,956.3**	**216,073.0**	-6%

* Categorization of countries into group A, group B, group C, group T (countries with economies in transition) and group O (other countries) as defined in DP/FPA/1996/15

Table 8

Administrative and programme support services

Comparison of 1995 and 1996 expenditure
(Thousands of US Dollars)

Description	1995	1996
Salaries and wages	37,378.0	40,143.7
Training	972.4	822.0
Travel on official business	1,751.6	1,593.7
Rental and maintenance of premises	5,325.2	3,895.7
Other general expenses	6,887.1	8,318.7
Reimbursements to UN/UNDP a_/	3,413.1	3,313.7
Gross total	55,727.4	58,087.5
Less: Credits b_/	5,577.7	5,336.0
Net Total	50,149.7	52,751.5

a_ / Includes contributions to cover field visits of the Executive Board

b_ / Includes (1) credits earned from support charges assessed by UNFPA to Government-executed projects and (2) fees charged to projects for procurement activities, as well as (3) income derived from supports costs charged to trust funds for the execution of projects administered by UNFPA

Table 9

Trust Funds: Income and expenditure for 1995 and 1996
(Millions of US dollars)

	1995	1996	Per cent change
Income			
Income received (including interest)			
- Multi-bilateral projects	15.9	20.2	27.0%
- Procurement services	14.4	24.1	67.2%
- Other trust funds	(0.1)	0.2	-252.3%
- Transfers and adjustments	3.0	4.9	63.8%
Total income	33.1	49.3	48.9%
Expenditure			
- Multi-bilateral projects	16.4	10.9	-33.5%
- Procurement services	14.4	20.2	40.7%
- Other trust funds	0.9	0.3	-64.4%
- Administrative and operational services	1.5	1.6	2.5%
Total expenditure	33.3	33.1	-0.6%
Surplus income/(expenditure)	(0.1)	16.3	-11,616.7%

Statement of movement of trust funds resources		
Balance as at 1 January	23.8	23.7
Surplus income/(expenditure)	(0.1)	16.3
Total unspent trust funds resources as at 31 December	23.7	39.9

Note: Figures may not add up to totals given due to rounding.

Table 10

Programme expenditures from trust funds by country for 1995 and 1996
(Thousands of US dollars)

Country	Category a/	1995	1996	Per cent change
Africa region (sub-Saharan)				
Angola	A	318.3	382.1	20.0%
Benin	A	0.5	(19.0)	-3900.0%
Burkina Faso	A	834.9	1,109.4	32.9%
Burundi	A	421.1	172.8	-59.0%
Cape Verde	A	362.5	9.0	-97.5%
Chad	A	0.0	375.4	
Eritrea	A	0.0	20.2	
Ethiopia	A	4,163.0	1,738.5	-58.2%
Gambia	A	68.9	47.4	-31.2%
Ghana	A	1,116.1	1,261.2	13.0%
Guinea-Bissau	A	29.7	10.1	-66.0%
Mozambique	A	231.0	1,029.5	345.7%
Niger	A	176.9	703.7	298.0%
Nigeria	A	0.1	0.2	100.0%
Rwanda	A	(0.2)	0.0	-100.0%
Uganda	A	1,175.1	1,485.2	26.4%
United Republic of Tanzania	A	411.4	375.5	-8.7%
Zambia	A	66.0	17.0	-74.2%
Subtotal category A		9,375.2	8,718.2	-7.0%
Namibia	B	314.3	41.4	-86.8%
Zimbabwe	B	(0.1)	4.0	-4100.0%
Subtotal category B		314.2	45.4	-85.6%
Country trust funds total		9,689.2	8,763.4	-9.6%
Regional trust funds total		(0.1)	(0.9)	800.0%
Africa (sub-Saharan) regional grand total		9,689.1	8,762.5	-9.6%
Arab States and Europe				
Egypt	A	77.9	36.1	-54.9%
Yemen	A	13.9	6.5	-52.9%
Subtotal category A		91.8	41.6	-54.6%
Algeria	B	1,295.2	(40.8)	-103.2%
Morocco	B	12.9	253.4	1879.7%
Syrian Arab Republic	B	443.5	206.4	-53.7%
Tunisia	B	1.6	54.7	3318.8%
Subtotal category B		1,745.1	473.7	-72.9%
Romania	T	6.8	154.5	2172.1%
Oman	O	13.9	2.4	-82.7%
Country trust funds total		1,857.4	672.2	-63.8%
Regional trust fund total		302.9	79.1	-73.9%
Arab States and Europe regional grand total		2,160.3	751.3	-65.2%

Table 10 (continued)

Programme expenditures from trust funds by country for 1995 and 1996
(Thousands of US dollars)

Country	Category a/	1995	1996	Per cent change
Asia and the Pacific				
Bangladesh	A	10,946.2	8,918.7	-18.5%
Cambodia	A	146.3	106.7	-27.1%
Mongolia	A	2.2	33.6	1427.3%
Nepal	A	341.6	904.1	164.7%
Pakistan	A	3,146.0	5,063.2	60.9%
Solomon Islands	A	0.0	113.2	
Tuvalu	A	0.0	97.8	
Vanuatu	A	0.0	89.3	
Subtotal category A		14,582.3	15,306.6	5.0%
Papua New Guinea	B	83.3	22.5	-73.0%
Philippines	B	282.1	283.2	0.4%
Viet Nam	B	1,180.2	(12.4)	-101.1%
Subtotal category B		1,545.6	293.3	-81.0%
China	C	179.8	0.6	-99.7%
Fiji	C	0.0	166.1	
Sri Lanka	C	840.5	1,924.0	128.9%
Thailand	C	3.3	0.0	-100.0%
Subtotal category C		1,023.6	2,090.7	104.2%
Central Asian countries	T	0.0	150.3	
Cook Islands	O	0.0	14.5	
Pacific Multi-Islands	O	189.5	112.4	-40.7%
Palau	O	0.0	10.4	
Subtotal other countries		189.5	137.3	-27.5%
Country trust funds total		17,341.0	17,978.1	3.7%
Regional trust funds total		122.0	0.0	-100.0%
Asia and the Pacific regional grand total		17,463.0	17,978.1	2.9%
Latin America and the Caribbean				
Haiti	A	0.0	162.2	
Nicaragua	A	308.2	182.2	-40.9%
Subtotal category A		308.2	344.4	11.7%
Bolivia	B	2.6	124.5	4688.5%
Brazil	B	3.6	(55.1)	-1630.6%
Honduras	B	46.7	15.8	-66.2%
Jamaica	B	75.1	0.0	-100.0%
Mexico	B	(9.4)	0.0	-100.0%
Peru	B	1,169.9	87.5	-92.5%
Subtotal category B		1,288.5	172.7	-86.6%
Country trust funds total		1,596.7	517.1	-67.6%
Latin America and the Caribbean regional grand total		1,596.7	517.1	-67.6%
Regional projects		424.8	78.2	-81.6%
Category A		24,357.3	24,410.8	0.2%
Category B		4,893.4	985.1	-79.9%
Category C		1,023.6	2,090.7	104.2%
Countries with economies in transition		6.8	304.8	4382.4%
Other countries		203.4	139.7	-31.3%
Country & regional subtotal		**30,909.3**	**28,009.3**	**-9.4%**
Interregional		**2,394.9**	**5,067.1**	**111.6%**
Trust funds grand total b/		**33,304.0**	**33,076.0**	**-0.7%**

a/ Categorization of countries into group A, group B, group C, group T (countries with economies in transition) and group O (other countries) as defined in DP/FPA/1996/15.

b/ Includes administrative and operational services (AOS) costs paid to United Nations agencies amounting to $39,948 in 1995 and $77,110 in 1996. Support costs paid to UNFPA totalled $1,498,611 in 1995 and $1,505,169 in 1996.

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Table 11

Historical financial summary
Regular resources income, expenditures and reserves for 1987-1996
(Millions of US dollars)

Year	Total new regular resources a_/	Total expenditures	Addition to reserves	Transfer to/from other funds	Resource surplus/ (deficit)	Unspent programme resources at year end b_/	Balance of Reserves	Total unspent resources
1987	156.1	140.5	7.0	-	8.6	24.1	37.0	61.1
1988	178.0	167.3	3.0	-	7.7	31.9	40.0	71.9
1989	185.2	203.6	5.0	-	(23.4)	8.5	45.0	53.5
1990	212.4	221.3	-	-	(8.9)	(0.4)	45.0	44.6
1991	224.0	229.1	-	-	(5.1)	(5.5)	45.0	39.5
1992	238.2	193.6	5.5	-	39.1	33.6	50.5	84.1
1993	219.6	203.5	2.5	-	13.6	47.2	53.0	100.2
1994	265.3	274.4	5.0	-	(14.1)	33.1	58.0	91.1
1995	312.6	312.1	10.0	-	(9.5)	23.7	68.0	91.7
1996	308.8	300.3	-	5.0	3.5	27.2	68.0	95.2

Note: Figures may not add up to totals due to rounding.

a_/ Total new regular resources include income from contributions, interest and other miscellaneous income.

b_/ Year-end regular resources include unallocated funds adjusted for surplus or deficit in resources and transfers to the operational reserve.

Table 12

Project expenditures, agency support costs and administrative expenditures, 1987-1996
(Millions of US dollars)

Year	Project Expenditures	Agency Support Costs			Administrative and programme support costs		Total expenditures
		UN	UNFPA a_ /	NGOs	Headquarters	Field Offices b_ /	
1987	107.0	7.3	1.4	0.4	18.8	5.6	140.5
1988	129.8	8.4	1.7	0.6	17.0	9.7	167.3
1989	157.4	10.9	2.0	1.2	20.5	11.6	203.6
1990	168.9	10.9	2.4	1.3	22.2	15.6	221.3
1991	171.8	11.1	2.2	1.7	23.6	18.7	229.1
1992 c_/	128.2	17.5	4.3	1.0	23.8	18.8	193.6
1993 c_/	134.3	15.1	7.4	1.6	24.6	20.5	203.5
1994 c_/	201.4	15.7	10.5	1.8	23.4	21.8	274.4
1995 c_/	230.9	18.1	11.6	1.3	24.8	25.4	312.1
1996 c_/	216.5	17.1	12.7	1.3	25.2	27.6	300.3

Source: UNFPA year-end Audited Financial Statements for 1987 to 1995, and Unaudited Financial Statements for the year 1996. Official Records of the General Assembly: Forty-second Session to Fifty-first Session, Supplements No. 5G(A/42/5/Add.7 to A/51/5/Add.7).

a_/ This category comprises, inter alia, support costs to UNFPA for procurement services provided and overhead charges assessed by UNFPA to Government-executed projects. Beginning with the biennium 1986-1987, these support cost credits have been applied to the APSS budget as approved by the Governing Council in decision 86/35, paragraph 10. (In previous years these costs were included under programme expenditures.)

b_/ In 1985, and prior years, all field costs were included in programme expenditures. Beginning with the APSS biennial budget for 1986-1987 the APSS expenditure is net of credits reported in footnote 2 of the text (see para. 11). In 1986 and 1987 the salary costs of UNFPA international field office staff were included in the APSS budget, and all other costs of the UNFPA field offices were reported under programme expenditures. Since January 1988, all field office costs are included in the APSS budget.

c_/ The current successor support-cost arrangements began in 1992. A breakdown of technical support services (TSS) costs and administrative and operational services (AOS) costs for United Nations agencies, UNFPA and NGOs, including intergovernmental institutions and other agencies, is contained in table 6.

Table 13

Administrative costs as a percentage of total income and total expenditure 1987-1996
(Millions of US dollars)

Year	APSS a_/			Total income	APSS costs as a percentage of total income	Administrative costs as a percentage of total income	Total expenditures	APSS costs as a percentage of total expenditure	Administrative costs as a percentage of total expenditure
	Administrative Cost (Net)	Programme Support Services	Total b_/						
1987	7.2	17.2	24.4	156.1	15.6	4.6	140.5	17.4	5.1
1988	8.8	17.9	26.7	178.0	15.0	4.9	167.3	16.0	5.3
1989	11.5	20.6	32.1	185.2	17.3	6.2	203.6	15.8	5.6
1990	12.4	25.4	37.8	212.4	17.8	5.8	221.3	17.1	5.6
1991	12.3	30.0	42.3	224.0	16.9	5.5	229.1	18.5	5.4
1992	13.1	29.5	42.6	238.2	17.9	5.5	193.6	22.0	6.8
1993	13.3	31.8	45.1	219.6	20.5	6.1	203.5	22.2	6.5
1994	11.0	34.2	45.2	265.2	17.0	4.1	274.4	16.5	4.0
1995	12.6	37.6	50.2	312.6	16.1	4.0	312.1	16.1	4.0
1996	13.3	39.5	52.8	308.8	17.1	4.3	300.3	17.6	4.4

Source: UNFPA year-end Audited Financial Statements for 1987 to 1995, and Unaudited Financial Statements for the year 1996. Official Records of the General Assembly: Forty-Second Session to Fifty-first Session, Supplements No. 5G(A/42/5/Add.7 to A/51/5/Add.7).

a_/ See paragraph 11, footnote 3.

b_/ In 1985, and prior years, all field costs were included in programme expenditures. Beginning with the APSS biennial budget for 1986-1987 the APSS expenditure is net of credits reported in footnote 2 of the text (see para. 11). In 1986 and 1987 the salary costs of UNFPA international field office staff were included in the APSS budget, and all other costs of the UNFPA field offices were reported under programme expenditures. Since January 1988, all field office costs are included in the APSS budget.

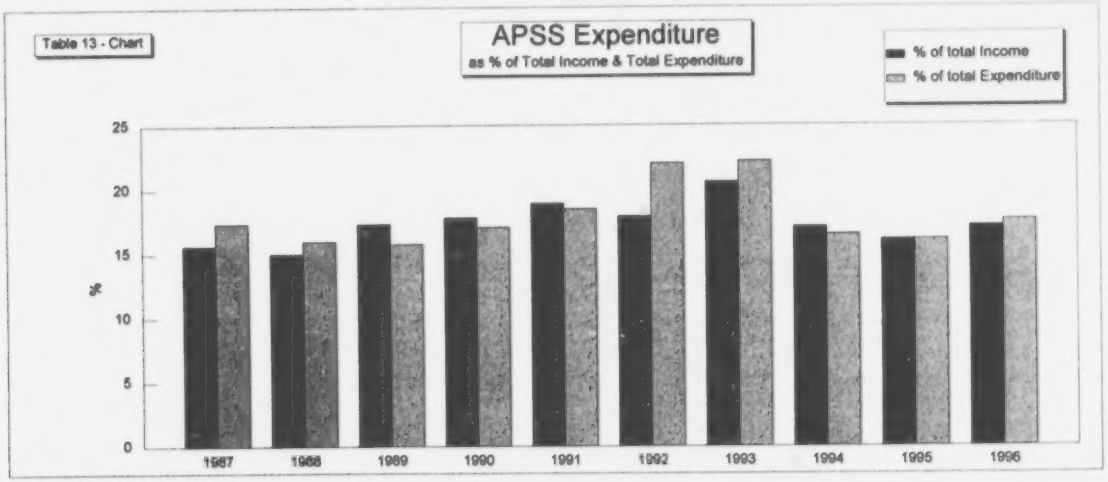

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Table 14

Income and expenditures under UNFPA trust funds, 1987 - 1996
(Millions of US dollars)

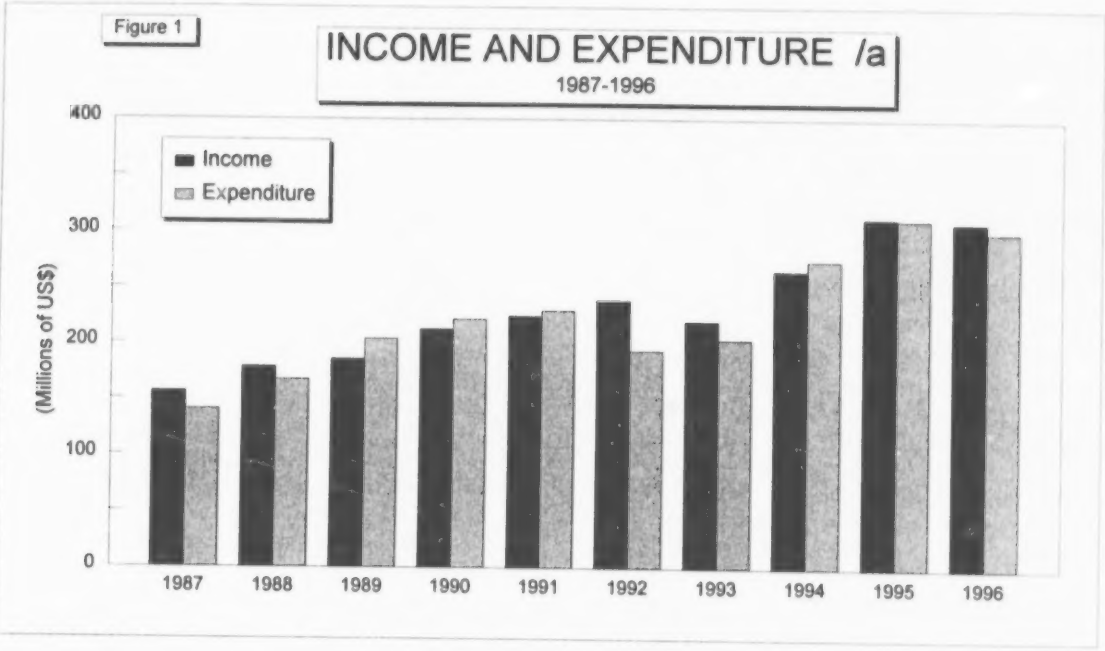
Year	Total income (contributions plus interest)	Programme expenditures a_/	Support costs paid to UNFPA b_/	Total Expenditure
1987	4.8	3.4	0.1	3.5
1988	11.8	5.9	0.2	6.1
1989	7.3	6.1	0.1	6.2
1990	11.8	11.1	0.2	11.3
1991	8.2	11.3	0.2	11.5
1992	43.1	38.2	1.6	39.8
1993	26.6	17.3	0.5	17.8
1994	63.9	57.0	2.8	59.8
1995	33.1	31.8	1.5	33.3
1996	49.3	31.6	1.5	33.1

Source: UNFPA year-end Audited Financial Statements for 1987 to 1995, and Unaudited Financial Statements for the year 1996. Official Records of the General Assembly: Forty-second Session to Fifty-first Session, Supplements No. 5G(A/42/5/Add.7 to A/51/5/Add.7).

a_/ Includes administrative and operational services (AOS) costs paid to United Nations executing agencies of $39,948 in 1995 and $77,110 in 1996

b_/ Includes UNFPA income derived from support costs charged to trust funds for the execution of projects administered by UNFPA.

Figure 1


INCOME AND EXPENDITURE /a
1987-1996
Income
Expenditure
(Millions of US$)
400
300
200
100
0
1987
1988
1989
1990
1991
1992
1993
1994
1995
1996

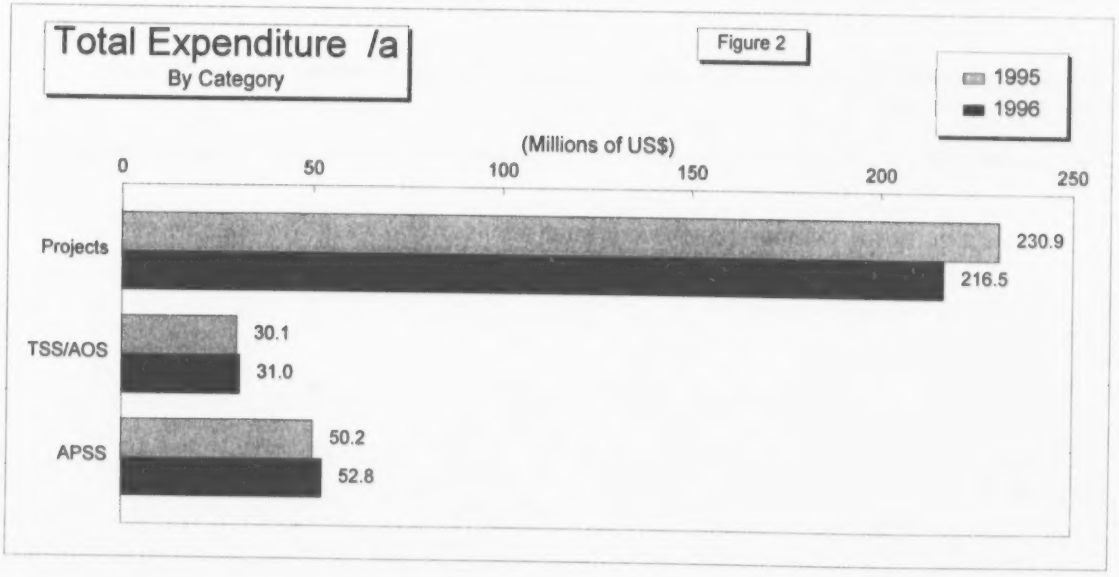

Total Expenditure /a
By Category
Figure 2
1995
1996
(Millions of US$)
0
50
100
150
200
250
Projects
230.9
216.5
TSS/AOS
30.1
31.0
APSS
50.2
52.8

Figure 3

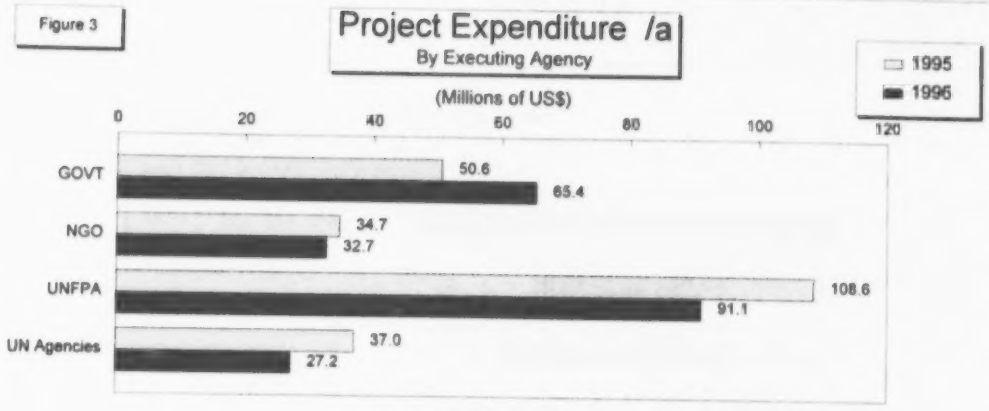
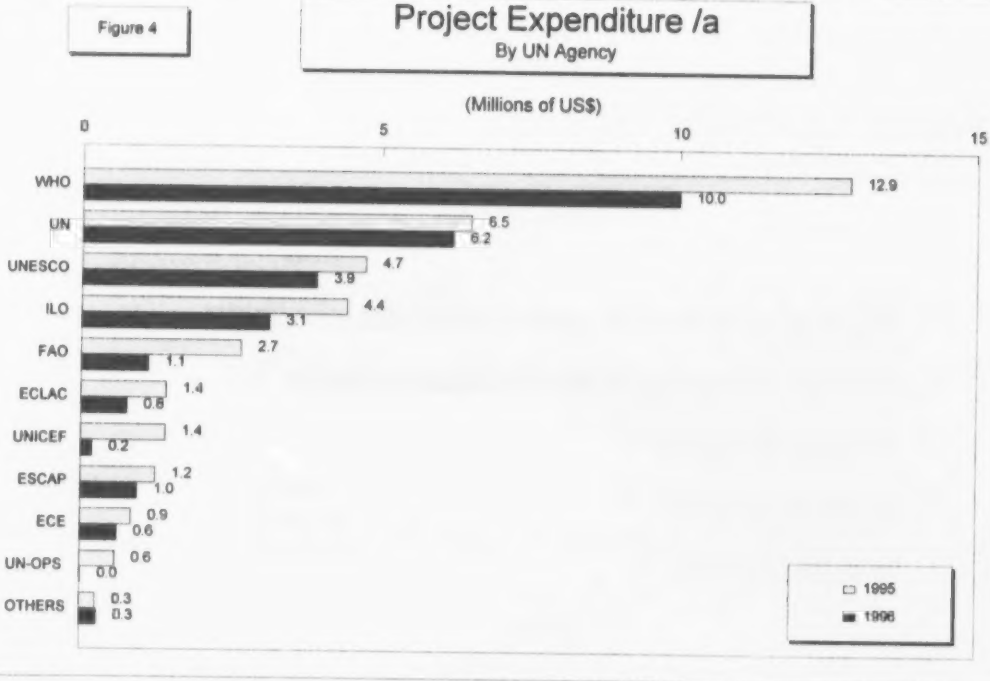
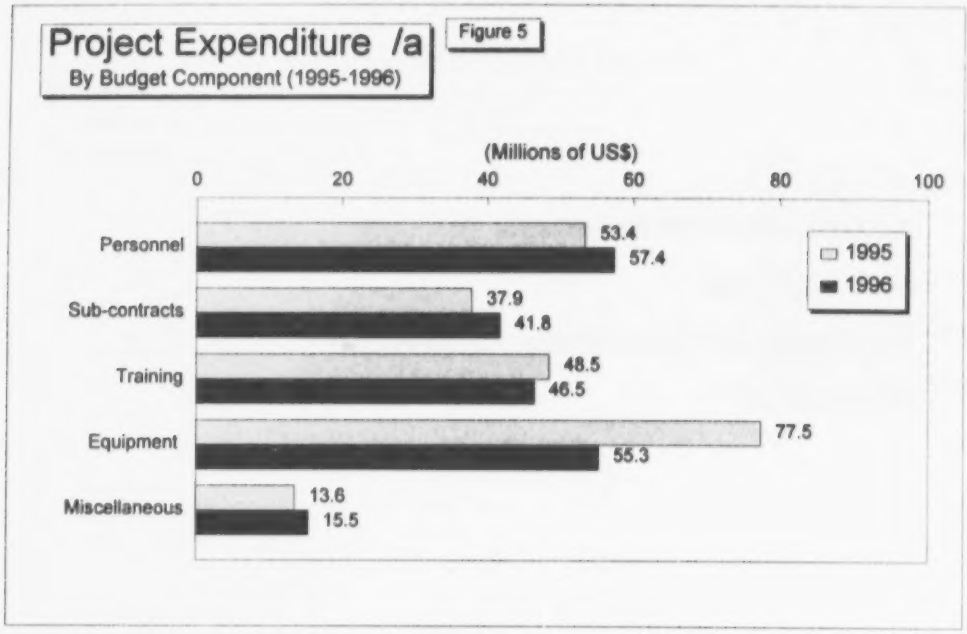
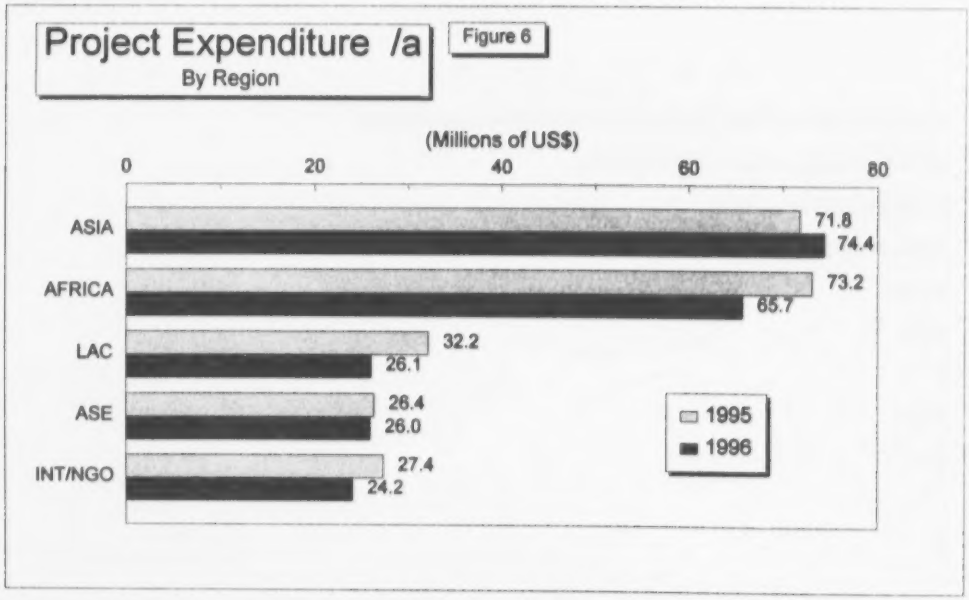


Figure 4







/a Figures 1 through 6 relate to UNFPA regular resources only

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